

CALIFORNIA MEDICAL ASSOCIATION

This department contains official notices, reports of county society proceedings and other information having to do with the State Association and its component county societies. The copy for the department is submitted by the State Association Secretary, to whom communications for this department should be sent. Rosters of State Association officers and committees and of component county societies and affiliated organizations, are printed in the front advertising section on pages 2, 4 and 6.

CALIFORNIA MEDICAL ASSOCIATION†

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PHILIP K. GILMAN, M.D.....Council Chairman
GEORGE H. KRESS, M.D..Secretary-Treasurer and Editor
JOHN HUNTON.....Executive Secretary

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OFFICIAL NOTICES

HOUSE OF DELEGATES: FIRST MEETING Minutes of the Fortieth (40th) Annual Session of the House of Delegates of the California Medical Association

*Held at Hotel Biltmore, Los Angeles, California
Sunday, May 2, and Monday, May 3, 1943*

First Meeting, Sunday Noon, May 3, 1943, in the Music Room, Hotel Biltmore

The first meeting of the fortieth session of the House of Delegates of the California Medical Association, at the seventy-second annual session, held in Hotel Biltmore, Los Angeles, California, was called to order at 12:00 o'clock noon, Speaker Lowell S. Goin, presiding.

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SPEAKER GOIN: The House will be in order. The first order of business is the temporary report of the Credentials Committee (Edward S. Babcock, of Sacramento; S. A. Jelte, of Oakland; and Eugene F. Hoffman, of Los Angeles).

The Chair recognizes the Chairman of the Committee on Credentials, Dr. Hoffman of Los Angeles.

DR. EUGENE F. HOFFMAN (Los Angeles): Mr. Speaker, your Credentials Committee reports that there are 48 qualified delegates seated. I move that the report be adopted.

The motion was seconded, put to a vote and unanimously carried.

SPEAKER GOIN: The Committee's report is adopted, and it is so ordered.

Mr. Secretary, is there a quorum present?

SECRETARY KRESS: Mr. Speaker, a quorum is present.

SPEAKER GOIN: The provisions of the Constitution and By-Laws have been complied with. I now declare the House duly constituted and open for such business as may lawfully come before it.

The purpose of convening at twelve o'clock is to comply with the provisions of the Constitution. It demands at least two meetings of the House of Delegates during an Annual Session, and that these two meetings be separated by 24 hours. You will need to have lunch, so it is our intention to now recess the House, to reconvene at 1:30. The Chair will entertain a motion to recess until 1:30 P. M.

DR. JOHN W. CLINE (San Francisco): I move we recess until 1:30 P. M.

DR. KARL L. SCHAUPP (San Francisco): I second the motion.

The motion was put to a vote, and it was unanimously carried.

SPEAKER GOIN: The House stands recessed until 1:30.

At 12:15 P. M. the House recessed, to reconvene at 1:30 P. M.

The House of Delegates reconvened at 1:30 P. M. in the Music Room of the Biltmore Hotel, Speaker Goin presiding.

Post-Recess Meeting

SPEAKER GOIN: The House will again be in order.

The purpose of receiving a supplemental report of the Credentials Committee is to determine if there is a

† For complete roster of officers, see advertising pages 2, 4, and 6.

quorum present. The Chair recognizes the Chairman of the Committee on Credentials, Dr. Hoffman.

DR. HOFFMAN: Mr. Speaker, your Committee on Credentials reports that 48 qualified delegates have been seated.

I move that the report be accepted as the Roll Call of this Body.

DR. EDWIN L. BRUCK (San Francisco): Second the motion.

SPEAKER GOIN: It has been seconded by Doctor Bruck that this is the Report of the Credentials Committee, and the Roll Call of the House. Is there any discussion?

There being no discussion, the motion was put to a vote and was unanimously carried.

SPEAKER GOIN: It is carried and so ordered.

Reference Committees

The Reference Committees of the House appointed by the Speaker are as follows:

(a) Committee on Credentials:

Dr. Edward S. Babcock, Sacramento.

Dr. S. A. Jelte, Oakland.

Dr. Eugene F. Hoffman, Los Angeles, Chairman.

(b) Reference Committee on the Reports of Officers and Standing Committees (Reference Committee No. 1):

Dr. Deon A. Crew, San Luis Obispo.

Dr. H. D. Neufeld, Contra Costa County.

Dr. J. Frank Doughty, Tracy, Chairman.

(c) Reference Committee on the Report of the Council and the Report of the Secretary-Treasurer (Reference Committee No. 2):

Dr. James C. Doyle, Beverly Hills.

Dr. E. C. Halley, Sanger.

Dr. W. H. Geistweit, Jr., San Diego, Chairman.

(d) Reference Committee on Resolutions, Amendments to the Constitution and By-Laws, and New and Miscellaneous Business (Reference Committee No. 3):

Dr. John Hunt Shephard, San Jose.

Dr. Thomas A. Card, Riverside.

Dr. Samuel Ayres, Jr., Los Angeles, Chairman.

The time and place will be announced later.

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We come to the Report of the Council, Dr. Philip K. Gilman, Chairman, which is contained in the printed reports.

Next are the Reports of the Auditing Committee, the Secretary-Treasurer, the Executive Secretary, the Editor, the District Councilors and Councilors-at-large, and the Report of the Chairman of the Department of Public Relations, all of which have been printed in CALIFORNIA AND WESTERN MEDICINE.

If there is no objection on the part of the House, we will save a great deal of time by simply referring these to the proper committees without taking your time to read them. If there is no objection, the Reports of the Auditing Committee, the Executive Secretary, the District Councilors and the Councilors-at-large will be referred to Committee No. 1.

The Reports of the Council and Secretary-Treasurer and the Editor are referred to Committee Number 2.

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The next item of business will be the Report of the General Counsel, Hartley F. Peart, Esquire.

Report of General Counsel, Hartley F. Peart

LEGAL COUNSEL PEART: Mr. Speaker and Members of the House of Delegates: Time is precious today and

I am only going to attempt to report briefly on the status of the Association's application to the Industrial Accident Commission for a revision of the fee schedule in compensation cases. The new schedule compiled by the Committee appointed by the Council, consisting of Dr. Donald Cass, Chairman, Dr. Frank A. MacDonald and Dr. Carl L. Hoag, assisted by the Executive Secretary, John Hunton, covers 547 procedures and operations against 87 in the present schedule. That is a very extraordinary statement, but it is a fact. The present schedule of the Industrial Accident Commission covers only about 87 procedures and operations. The new proposed schedule raises home, office and hospital visits about 50 per cent, and operations and procedures about 25 per cent over the existing schedule. It has been approved by Dr. Harbaugh, Medical Director for the Commission.

The existing schedule became effective June 1, 1920, nearly 23 years ago. The Commission held a public hearing on February 15th last. Captain Philip K. Gilman, Chairman of the Council, Mr. Hunton and members of the Committee were in attendance, prepared to testify, but the Commission said they did not wish to hear testimony. At the hearing, on behalf of the Association, it was pointed out that no fees had ever been fixed on over 450 operations and procedures; that the present scale for operations and procedures covered was inadequate and unfair to the injured workmen, and that in the intervening 22½ years, compensation under the Act had been increased and benefits enlarged; that employment had greatly increased with a corresponding increase in this practice; that medical practice had made great advances in diagnosis and treatment, and that the injured workman is today receiving far better care with better results than 22½ years ago; that costs to the doctors for education, equipment, maintenance, practice and living have greatly increased; that wages have increased, but that compensation rates have declined.

We found that the reports of the insurance companies filed in the office of the Insurance Commissioner showed that dividends were being paid shareholders by stock companies, and refunds were being made to members of mutual companies out of premiums paid for compensation insurance, and the records of the Commission itself, which I personally examined, showed that the State Insurance Compensation Fund had for years been rebating millions of dollars to its policyholders.

There was a large attendance at the hearing. Representatives of associations of insurance companies appeared by counsel. Self-insurers were in attendance. No direct opposition was voiced by anyone except the State Compensation Insurance Fund, by one of its attorneys, who stated that it was opposed to the application. Representatives of insurance companies urged that there be a study of statistics, one of them stating that the Commission was somewhat new and inexperienced. We urged that the primary purpose of the Compensation Act as stated in the Constitutional Amendment was based on medical care to the injured workman, and that compensation insurance is secondary.

The Commission took the matter under consideration. A few days ago we received a letter from the Secretary of the Commission advising that, in view of the pendency of Assembly Bill 292 and Senate Bill 1097 in the Legislature (which bills I thought would have been described to you by Dr. Murray, Chairman of the Legislation Committee), the Commission would defer further consideration of the application until the Legislature adjourned. As Dr. Murray has not spoken, I will say that AB 292 was introduced by Assemblyman Gaffney and some of his associates, all of whom are very friendly

to Labor. This bill provided, in effect, that rebating from the Industrial Accident Commission's fee schedule would constitute a misdemeanor and would prohibit it.

We took this bill and added three amendments, which provided that the rebating or fee-splitting or cutting with insurance companies under the fee schedule established by the Commission, should constitute grounds for revocation of the license of the insurance company engaged in this practice; that it would constitute a felony by anyone violating any of its provisions, and that any agreement by an insurance company or by an employer for the furnishing of medical or hospital care to injured workmen, must be filed with the Commission within five days after it is made and, unless approved by the Commission within 30 days thereafter, should be void and of no effect.

These amendments were accepted by the Labor representatives and were embodied in AB 292. Dr. Murray and Dr. Reed reported, however, that the conditions were such with reference to the Assembly Committee on Insurance, where the bill had been referred, that there was very little likelihood of our obtaining any action whatsoever upon the bill. We, thereupon, secured the introduction of the bill with the amendments in the Senate, through the courtesy of Senator Burns of Fresno where, with some active work on the part of some of our Labor friends, the bill was referred to the Labor Committee of the Senate. Our representative at Sacramento was subsequently advised by our friends in the Labor ranks that they had made an agreement for the enactment of some other measures, and that under the terms of this agreement, they would be compelled to oppose the passing of this bill. Our representative there felt that under these circumstances it was useless for us to try to do anything further at this session.

The members of the Commission and its officers have been most courteous and attentive throughout the proceedings.

Thank you. (Applause.)

SPEAKER GOIN: The Report of the General Counsel will be referred to Committee No. 1.

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With the consent of the House, the Chair will now refer all agenda items under Number 13, *Reports of Standing Committees*, to Reference Committee Number 1.

Under *Special Committees* we come to the reports on the Committee on Public Health Education and the Committee on Medical Benevolence. These have both been published, and we will refer them to Reference Committee Number 1.

DR. AXCEL E. ANDERSON (Fresno): That was just a preliminary report rendered by the Committee on Physicians' Benevolence. I have here a further report.

SPEAKER GOIN: The Chair recognizes Dr. Anderson, Chairman of the Committee on Physicians' Benevolence. *Reference Number 1: (See 6, 39 and 41.)*

Report of Committee on Physicians' Benevolence

DR. AXCEL E. ANDERSON: Mr. Speaker, Members of the House: As reported in the "Pre-Convention Bulletin," the amendment to the By-Laws of the California Medical Association to permit the allocation of one dollar per active member from the annual dues to the Benevolence Fund was defeated at a meeting of the House of Delegates a year ago, because it was assumed by the Reference Committee that it would result in the freezing of too much of the income of the California Medical Association.

There is an amendment to the Constitution which will come up for a vote at this meeting. The Council was instructed by its 1942 House of Delegates to appro-

priate money for Benevolence if it was needed. No money has been voted for 1943, but an allocation of \$5,000.00 in the 1944 budget has been ordered by the Council.

On March 5, 1943, the following reports on receipts and expenditures was made by Mr. John Hunton, Secretary of this Committee. This Committee is supposed to render an annual report to the House of Delegates.

On May 6, 1942, following the close of the 1942 Annual Session, there was a balance of \$2,685.65 in the checking account of the Physicians' Benevolence Fund. There was also an additional balance of \$4,345.08 in the Savings Account, which was transferred to the care of the "Trustees of the California Medical Association." Since that date there has been no increase in the commercial account, but there has been an increase of \$24.22 in the Savings Account from accumulated interest.

During the period from May 6, 1942, to date, there had been 18 payments made from the checking account to beneficiaries. The payments have taken care of the necessary living expenses for some of these men, provided a blood transfusion for one retired physician, paid hospital bills and filled in the financial gaps in other cases. The total payments, since May 6, 1942, amount to \$613.15, leaving a balance in the checking account at this time of \$2,071.50.

Since that time some contributions from the Woman's Auxiliary have been received and acknowledged by Mr. Hunton.

The Los Angeles County Physicians' Benevolence Association has continued caring for a large number of the needy, and has had very little help from our State Fund.

I have a letter from Dr. Hohl which shows very well what can be done, and is an appeal for more help from our Fund.

(COPY)

"Dear Doctor:

For your information and for an analysis of the Los Angeles Physicians' Aid, our expenditures must be interesting, and, besides all this, we have apportioned among ourselves many hundreds of dollars' worth of medical care to our clients.

"We have had donations of worn suits, overcoats, hats, dresses, shoes, etc., etc., that required soliciting, collecting, cleaning and distribution. We have had huge expenditures for groceries, dental care, drugs, etc., etc., the actual figures for our general expenditures are difficult to arrive at."

Then Dr. Hohl lists a number of these items, totalling \$2,571.68.

"This year, with various chairmen and officers overworked, we have had to have an Executive Secretary and have had to pay her \$50.00 per month, where previously for distributing and for advising our doctors, she received but \$10.00.

"We have four in the hospitals and rest homes now.

"Food costs have increased and naturally we worry a little over our budget. I am wondering just where the State Fund can help us more. It is designated to help out with extras or to supplement the client's own funds. In many instances, as the client gets older and sicker, his own funds are totally inadequate. Mr. Hunton can tell you how much he has sent to us. We could be much more generous than we are, although as it is we get the comforts and necessities which appear small in every case."

(Signed) ELIZABETH M. HOHL.

Dr. Hohl states that the income of the Los Angeles Association is about \$1,500.00 a year and is collected.

from donations from our Los Angeles members. She states that their expenditures are nearly \$350.00 a month to supplement public charity for our people, and that they need at least \$200.00 a month from our Fund.

In trying to look ahead and providing for future contingencies, your Committee can see the possibility of increasing the demand for temporary help from our members returning from military duties. Financial assistance during this period of the reestablishing of a private practice may not be provided by the National Government. Widows and children of some of these members may require help unless generous pensions are promptly paid during these times of high cost of living.

Changed economic conditions, resulting from the war, may render business interest and investments on which some retired members depend nonproductive and valueless. They may need help. The possibility of a somewhat higher Old Age Pension by the State is more than offset by the increasing costs of everything needed to keep alive.

Considering these probable increased demands on our Fund in the near future, in addition to present demands—including \$3,600.00 required from the Los Angeles area—your Committee recommends efforts to increase the available funds. Secretaries of county medical societies have been furnished blanks for voluntary contributions, and it is desired that these be mailed to all active members. The Woman's Auxiliary should be encouraged in every way to continue their very valuable activities to raise money for this Fund.

Some broad questions of policy need an answer from the House of Delegates or the Council as to how long should temporary aid be given. We have no money for pensions, but have extended payments and cash for several months until Old Age pensions or county charity could be secured. Are we to continue permanently the present activities of supplementing public charity, or shall we plan and make an effort to accumulate a fund big enough to enable us to pay a pension? We can pay no money to the needy because thereby they forfeit their pension or county allowance. We are merely giving them some food, clothing, drugs and other necessities, and before we do that they must become paupers and ask for public charity.

It seems possible and probable that about the best thing and what we can do most is to give the public a big boost if we plan to provide a decent living allowance for our poor and unfortunate by a yearly allocation of \$5,000.00 a year with other possible sources of income. Under normal times and conditions that would soon build up a surplus, while we continue our policy of simply supplementing public charity.

A Social Security fund, patterned after the Federal Government system, has been thought of as a possible solution of the problem of providing against indigency. A yearly payment by every member to such a fund would constitute insurance against misfortune. If a member never required help he would have the satisfaction of knowing he helped someone who did.

Thank you. (Applause.)

SPEAKER GOIN: The report of Dr. Anderson's Committee will be referred to Reference Committee Number 1.

For the purpose of receiving an addendum to the Report of the Council, I will call on Capt. Philip K. Gilman, Chairman of the Council.

CAPT. PHILIP K. GILMAN (San Francisco): The following resolution is added to the Report of the Council.

Reference Number 2: (See 25 and 35.)

Resolution Regarding Industrial Fee Schedule

Resolved, That the House of Delegates of the California Medical Association hereby reiterates its disapproval

of the present inadequate fee schedule of the California Industrial Accident Commission, adopted nearly twenty-three years ago, and respectfully requests the Industrial Accident Commission to adopt the revised fee schedule submitted by the California Medical Association to the Commission on October 16, 1942; and be it further

Resolved, That the California Medical Association hereby expresses its unqualified disapproval of any practices under Workmen's Compensation laws involving the rebate of fees in any form or manner, the payment of physicians on the basis of a percentage of premiums collected, or otherwise, at a rate less than the fee schedule established by the Industrial Accident Commission; and be it further

Resolved, That a special committee of three, to be appointed by the Chairman of the Council, is hereby created to represent the California Medical Association in all matters relating to Workmen's Compensation practice, and to carry into effect the policies hereinabove set forth.

SPEAKER GOIN: The Report of the Council, together with the addendum, will be referred to Reference Committee Number 2.

We now come to Item 14 of the Agenda—*Unfinished Business*. Under this heading appears "*Proposed Amendments to Constitution*." There is an amendment pending, concerning "*Annual Allocation of One Dollar to C.M.A. Physicians' Benevolence Fund*" and it has been published. Without any discussion, this amendment which appeared in the OFFICIAL JOURNAL of April, 1943, on page 164, is referred to Reference Committee Number 3.

In introducing your *Resolutions*, please have your *resolutions in triplicate* and present them to the Secretary. In presenting a resolution to the House, please give your name and county association. As the reporter does not know you, please give your name, neither do I know all of you.

The Chair will recognize Capt. Philip Gilman who will present a resolution.

CAPTAIN PHILIP K. GILMAN: The following resolution is submitted.

Reference Number 3: (See 40.)

Proposed "Military Colleagues' Postgraduate Fund"

WHEREAS, Large numbers of members of the California Medical Association have given up civilian practice to enroll as medical officers in the Medical Corps of the United States Army and Navy, and in so doing, when they return to practice in civil life, may find themselves temporarily handicapped by the sharp change from military to civilian medicine; and

WHEREAS, Members of the California Medical Association who, for various reasons, are obliged to remain in civilian practice wish to give expression of their appreciation and regard for the sacrifices and services rendered by their fellow members who have enrolled with the Armed Forces of our Country; therefore be it

Resolved, By the House of Delegates of the California Medical Association that a proposed amendment to the Association's By-Laws, through which a separate fund would be established to make possible the granting of honoraria to cover the costs of postgraduate or refresher courses of at least six weeks' duration, for colleagues returning from military service, be approved in principle; and be it further

Resolved, That it is suggested that the said fund shall be established in the year 1943, and that the Council of the Association be requested to set aside and earmark in a fund, to be known as the Military Colleagues' Postgraduate Fund, the sum of two dollars from the annual dues of each member of the Association whose State Association dues have been received from the county medical society in which he is an active member; and be it further

Resolved, That if the fund be established, it is suggested that the expenditures from this fund be placed under the jurisdiction of a special committee to be known as the Committee on Postgraduate Courses for Military Colleagues; the said committee to consist of five members appointed by the Council (three from the general mem-

bership and two ex-officio members, one the chairman and the other the secretary of the standing Committee on Postgraduate Activities); provided, however, that if brought into being, the said Special Committee's general policies and expenditures must be submitted to and have the approval of the Council of the Association; and be it further

Resolved, That it be suggested the fund so established be continued and added to each year, in similar manner, through appropriation by the Council, except as the House of Delegates in any year may give other instructions to the Council; it being provided that the Association's House of Delegates may in its discretion at any time terminate the work of the Special Committee, and make provision for the transfer of moneys remaining in the Military Colleagues' Postgraduate Fund to such other fund or funds of the Association as may be deemed desirable.

SPEAKER GOIN: The resolution is referred to Reference Committee Number 3.

CAPTAIN GILMAN: The following is a *Proposed Amendment* to the California Medical Association By-Laws to enable that to be done which I have just indicated.

Reference Number 4:

Proposed (a) Committee on Postgraduate Courses for Military Colleagues; and (b) Military Colleagues Postgraduate Fund

Resolved, That a new section be added to Chapter V of the California Medical Association By-Laws through an amendment as follows:

Chapter V. Committees.

Section 24(a) Committee on Postgraduate Courses for Military Colleagues.

(b) Military Colleagues' Postgraduate Fund.

(a) Committee on Postgraduate Courses for Military Colleagues:

A committee, to be known as the Committee on Postgraduate Courses for Military Colleagues, shall be appointed by the Council within 90 days after the adjournment of the Annual Session at which this amendment is adopted by the House of Delegates.

The Committee shall consist of five members to be appointed by the Council. Three of these shall be selected from the active members of the Association, their terms of office being for three years; provided, that in the first committee appointed, one member shall be given a term of one year, another, two years, and the third, three years. The Council shall designate one of the three members so appointed as chairman. In addition, there shall be two ex-officio members, one being the chairman of the Committee on Postgraduate Activities and the other its secretary. The ex-officio members shall not have the right to vote in the Committee.

(b) Military Colleagues' Postgraduate Fund:

A fund to be known as the "Military Colleagues' Postgraduate Fund" shall be established by the Council, beginning with the current year, 1943, as follows:

The Council in the year 1943 and in each year thereafter, until otherwise instructed by the House of Delegates, shall allocate from the dues of every active member as received from a component county medical society, the sum of two dollars (\$2.00) and shall place the same in a separate fund under the above name. Expenditures from the said fund shall be limited to the expenses involved in furnishing postgraduate or refresher courses to military members of the Association, returning from military to civilian practice; provided, that the Committee on Postgraduate Courses for Military Colleagues shall first receive the approval of the Council concerning its general policies in regard to postgraduate or refresher courses, and that its general financial policies shall likewise first receive the approval of the Council.

The Committee on Postgraduate Courses, prior to beginning its active work, shall formulate and submit to the Council for approval a detailed report in which its recommendations and proposed procedures will be outlined. Such a report shall be submitted by the Committee at each Annual Session. Special reports shall be submitted at other times on either the Committee's initiative or in response to request from the Council.

SPEAKER GOIN: This being a By-Law Amendment, it may be acted upon at the second session of this House

tomorrow. It is referred to Reference Committee Number 3.

We will continue under Resolutions and New Business.

The Chair recognizes Dr. Kress:

SECRETARY KRESS: Mr. Speaker: The following is a proposed Amendment to the Constitution:

Reference Number 5:

Proposed By-Law Amendment Concerning Retired Members

Amend Article IV, Section 1(c) of the Constitution of the California Medical Association:

The Section 1(c) of Article IV of the Constitution of the California Medical Association is hereby amended by adding, immediately after the first paragraph contained in said section 1(c) a full new paragraph:

If an application for retired membership is submitted by a component medical society within the calendar year immediately succeeding the last calendar year in which the recommended applicant was an active member in good standing, the Council shall have authority to act on such application as though it had been submitted in the preceding calendar year during which active membership existed.

So that the said Section 1(c) of Article IV will therefore read:

(c) Retired Members:

Qualifications.—Retired members of the California Medical Association shall be elected by the Council on the recommendation of any component county society from those active members thereof who cease the practice of medicine for reasons satisfactory to such component county society and the Council, and who shall have been active members of the Association for ten years or more prior thereto.

Then follows the portion before read, the provision being made, Mr. Speaker, to make it possible for the Council to act upon these applications. Many of these applications are submitted in January and February of a succeeding year. Under the present By-Law, applications can be considered only when the applicant has active membership. In any calendar year, if dues are not paid on or before April 1st, active membership then ceases as of date of April 1st.

SPEAKER GOIN: This Amendment to the Constitution will remain on the table of the House for one year. It will be published twice and will come to the attention of the House for action at the next Annual Session.

The introduction of *Resolutions or New Business* is now in order.

DR. ELIZABETH MASON-HOHL (Los Angeles): Mr. Speaker, I submit the following resolution:

Reference Number 6: (See 1, 39 and 41.)

Proposal That Council Shall Outline Certain Procedure Policies of the Physicians' Benevolence Committee

WHEREAS, Physicians who are recipients of old-age or other financial assistance in California receive only \$18.00 to \$23.00 a month from county sources or \$40.00 to \$45.00 a month from State sources; and

WHEREAS, These sums are insufficient to provide decent minimum living standards for these aged and needy persons; and

WHEREAS, Additional physicians may require financial assistance after they return from military service to which they are devoting their time and their lives, and for which they may not be adequately compensated for the maintenance of personal, family and professional obligations; therefore be it

Resolved, That the House of Delegates instruct the Council to determine the policy of the Physicians' Benevolence Committee in the (1) matter of dispensing aid to the needy, (2) defining temporary aid and determining the limitations and amount of such payments, and (3) the policy in regard to the raising of funds with particular reference to the question of whether the committee should limit the raising of funds to approximately \$5,000.00

a year to be paid out in supplemental charity aid, and temporary relief, or (4) should strive to raise a much larger sum, by bequests, donations, voluntary contributions, and appropriation of California Medical Association funds for the establishment of an endowment fund which would eventually supply an income for current benevolence from year to year, and (5) ultimately develop a system of regular pension payments to take our needy out of the pauper or public charity class.

SPEAKER GOIN: This resolution will be referred to Reference Committee Number 3.

DR. LOUIS J. REGAN (Los Angeles): The following resolution is submitted:

Reference Number 7: (See 42.)

Proposal Concerning Special Committee on Post-War Plans for Medical Care

WHEREAS, There has been and is great public interest in problems of Social Security; and

WHEREAS, A number of "plans" have been put forward to meet the health needs of the community, and of the low-income groups particularly; and

WHEREAS, It appears that consideration is being given to these various "plans" by representatives of other schools of the healing profession, frequently in association and consultation with sociologists and economists; and

WHEREAS, In respect to a matter of such vital importance to physicians, and to the welfare of the community, that there may be no semblance of lack of interest, initiative, or understanding; therefore be it

Resolved, That the Council of the California Medical Association be instructed to appoint a Special Committee on post-war plans for medical care to study the problems of Social Security insofar as the health, and medical and hospital care of the people of this State are concerned, to study the more important plans and formulae already suggested, together with their implications, as they affect or may affect the physician-patient relationship, and to report to the Council its conclusions and recommendations.

SPEAKER GOIN: This resolution will be referred to Reference Committee Number 3.

Reference Number 8: (See 43.)

Proposal to Instruct C.M.A. Delegates to A.M.A. to Introduce a Resolution Concerning an A.M.A. Committee on Medical Service

DR. E. W. HAYES (Los Angeles County): Mr. Speaker: I wish at this time to present to this body a resolution which was first presented to and adopted by a group representing the North Central States meeting as part of the National Conference on Medical Service. This was in November, 1942, at St. Paul, Minnesota.

Again, on February 14, 1943, physician-representatives of 29 of the middle states met and adopted this resolution, and it is at their request that this resolution is being presented here at this time with the hope that California and other western states will see fit to act favorably upon this resolution.

This resolution is to be presented to the House of Delegates when we meet in Chicago in June.

It is as follows:

(Note. Due to lack of space and because the resolutions submitted by Dr. Hayes appeared in the May issue of CALIFORNIA AND WESTERN MEDICINE, on pages 292-294, they are not here reprinted.)

DR. L. A. ALESEN (Los Angeles): I wonder if the House is clear about the resolution just introduced by Dr. Hayes. It seems perfectly apparent to me it is not the intent of the backers of this resolution to have it adopted by this House of Delegates, but their intent is that this House should instruct the delegation from California to attempt to secure its adoption in the House of Delegates of the American Medical Association. If I am correct in that assumption, the resolution should be accompanied by a resolution something to this effect:

Resolved, That the delegation from California to the American Medical Association convention be, and they are hereby instructed to introduce and attempt to secure

the adoption by the House of Delegates of the American Medical Association of the within resolution.

Am I correct in that, Dr. Hayes?

SPEAKER GOIN: The matter is not one for adoption by this House. You want the delegates from California to introduce this resolution to the American Medical Association so you will introduce the resolution as it has just been worded?

DR. HAYES: Yes.

SPEAKER GOIN: This resolution will be referred to Reference Committee Number 3.

DR. ALESEN: I wish to present the following resolution:

Reference Number 9: (See 26 and 44.)

Proposal to Establish a Section on Public Health

WHEREAS, None of the twelve scientific sections of the California Medical Association emphasizes the importance of Preventive Medicine and Public Health; therefore be it

Resolved, By the House of Delegates that a new section to be known as the Section on Public Health be herewith established.

SPEAKER GOIN: This resolution will be referred to Reference Committee Number 3.

DR. DELL T. LUNDQUIST (Santa Clara County): I wish to submit the following resolution, briefly worded, but which seems to me important.

Reference Number 10: (See 45.)

Proposal Concerning Medical Ethics in Relation to War and Post-War Problems

Resolved, That the Council of the California Medical Association be requested to bring before the House of Delegates of the California Medical Association, at its next Annual Session, an extension of the principles of medical ethics of the American Medical Association, to deal with war and post-war problems, and to correlate the various county societies.

SPEAKER GOIN: The resolution is referred to Reference Committee Number 3.

DR. R. STANLEY KNEESHAW (Santa Clara County): This is a proposed resolution relating to the procurement of an adequate supply of medical officers for the Armed Forces of the United States.

Reference Number 11: (See 46.)

Proposal Concerning Procurement of Adequate Supply of Medical Officers for the Armed Forces

WHEREAS, In carrying through the plans of our Country's War Manpower Commission, the Surgeon Generals of the United States Army and Navy, through their respective Procurement and Assignment Services and allied bodies, have called upon the medical profession of the United States to provide an adequate supply of medical officer personnel, to the end that the ten million and more soldiers and sailors in the Armed Forces may be assured of medical care that will make for the fullest possible conservation of health and life; and

WHEREAS, California is one of the limited number of States in the Union that has thus far materially fallen behind in supplying its proportion and quota of medical officers; and

WHEREAS, The medical profession of California must not be found wanting in its patriotic obligations, with lasting stigma in case it fails to respond and meet its share of our Country's obligations; and

WHEREAS, It was found in World War I, that the decision—on whom among practicing physicians, according to age and other requirements and responsibility—was a matter that could be decided in greatest fairness through the opinions and judgments of local county committees of physicians, who would declare what physicians in their respective districts were seemingly the most available for military service; be it

Resolved, That the House of Delegates of the California Medical Association call upon the component county medical societies to bring into existence in their respective counties, committees of three to five members, the function of which will be the determination concerning availability of physicians in their counties; and be it further

Resolved, That the county committees so constituted be urged to use all legitimate ways and means to induce available physicians to promptly file their applications for service with the United States Army or Navy; and be it further

Resolved, That the county society committees so constituted work with and through the California Committee on Procurement and Assignment Service, of which Harold A. Fletcher, M. D., of San Francisco is Chairman, and Edward M. Pallette, M. D., of Los Angeles, is Vice-Chairman, the latter in relation to the fourteen southern counties and the former with supervision of the remaining counties of the State.

SPEAKER GOIN: The resolution will be referred to Reference Committee Number 3.

The Chair recognizes the Secretary, Dr. Kress, to introduce a resolution on behalf of the Council.

Reference Number 12: (See 36.)

SECRETARY KRESS:

Proposal Regarding Councilor Districts

Resolved, That the House of Delegates in accordance with the By-Law provisions, reaffirm or modify the existing arrangements of Councilor districts.

SPEAKER GOIN: The resolution is referred to Reference Committee Number 2.

DR. JESSE L. CARR (San Francisco): The following resolution is submitted:

Reference Number 13: (See 47.)

Proposal to Instruct C.M.A. Delegates to A.M.A. Regarding a Procurement and Assignment Service for Nursing Personnel for the Armed Forces

WHEREAS, There exists no routine and proper means of procuring nurses for the Armed Forces; and

WHEREAS, The only provision of nurses for the Armed Forces has been by enlistment through pressure groups and recruiting squads; and

WHEREAS, The proper delegation and assignment of nurses is as important to the military and civil population as is the delegation and assignment of physicians; therefore be it

Resolved, That the delegates from the California Medical Association to the American Medical Association be instructed to instigate and/or support a movement to establish a procurement and assignment service for nursing personnel for the military forces of the United States.

SPEAKER GOIN: This resolution is referred to Reference Committee Number 3.

DR. JOHN C. SHARP (Monterey County): Mr. Speaker, and Members of the House of Delegates: This resolution emanates from the Monterey County Medical Society and was originally sent to the Council of the California Medical Association in February of this year. We are now presenting it before the House of Delegates.

Reference Number 14: (See 48.)

Proposal that C.M.A. Council Institute a Survey Concerning Problems Related to Nursing Personnel

WHEREAS, It has come to the attention of the Monterey County Medical Society that there have been problems in connection with working out an adequate nursing supply for both the Armed Forces and civilian population, and that these problems have not only concerned themselves with the shortage of nurses but also with the question of salaries, wages and working conditions of nurses; and

WHEREAS, It has come to our attention that, at the present time, a ballot is being taken among the members of the State Nurses Association requesting a vote as to a 15 per cent increase in salaries over the 1941 pay schedule adopted by the State Nurses Association in that year and further authorizing the Board of Directors of the State Nurses Association to act as a collective bargaining agency for salaries, wages and working conditions among the nurses of California; and

WHEREAS, In connection with the above ballot a pamphlet has been printed and circulated by the California State Nurses Association, entitled, "C.S.N.A. and the Economic Security of its Members," in which certain statements are made in regard to the attitude of the hospitals in regard to the above problems which have not been solved, and other statements have been made rela-

tive to collective bargaining in regard to salaries and wages; therefore be it

Resolved, That the Monterey County Medical Society in regular meeting assembled does hereby request the Council of the California Medical Association to initiate steps in investigation of the problems relating to the shortage of nurses, and the problems discussed in the above named pamphlet, and take whatever steps are deemed necessary by the Council of the California Medical Association to bring a harmonious and fair solution of such problems.

SPEAKER GOIN: This resolution is referred to Reference Committee Number 3.

Executive Session

DR. BRYANT R. SIMPSON (San Diego): We have a resolution to present. I move that we go into Executive Session.

DR. W. H. GEISTWEIT, JR. (San Diego): I second the motion.

The motion was put to a vote and it was carried.

SPEAKER GOIN: It is so ordered. The Chair will appoint two Sergeants-at-Arms. The duties of the Sergeants-at-Arms will be to clear the House of all but the Executive Officers and those sitting as Delegates. Dr. Leo J. Madsen and Dr. James Doyle will act as Sergeants-at-Arms.

The Sergeants-at-Arms cleared the House of all those except the Executive Officers and members of the House of Delegates.

SPEAKER GOIN: The Chair rules that all delegates present are members of the House of Delegates. Are the Sergeants-at-Arms ready to report?

DR. LEO J. MADSEN: The House is duly constituted for Executive Session.

SPEAKER GOIN: If there is any person present who is not a member of the House of Delegates you would confer a great obligation on the House by retiring. If there is not, the House is in Executive Session and the Chair recognizes Dr. Blondin of San Diego.

DR. BLONDIN (San Diego): The following resolution is submitted:

This resolution is a little bit long, but we think it is important. . . .

Reference Number 15: (See 49.)

Concerning Medical Service Procedures by C.P.S. in San Diego County Federal Housing Projects

(Note. The minutes of the proceedings of the Executive Session of the House of Delegates are on file in the office of the California Medical Association. Delegates who were present are in position to give reports to their respective county societies.)

The Council of the Association will hold a two-day session on June 19-20, at which time the various problems involved will be given careful consideration. In due course, the component county societies will receive reports thereon.)

SPEAKER GOIN: The resolution is referred to Reference Committee Number 3.

Regular Session Resumed

SPEAKER GOIN: Is there any occasion to remain in Executive Session? If not, the Chair will entertain a motion to retire from Executive Session.

DR. SCHAUPP: I so move.

DR. BRUCK: Second the motion.

SPEAKER GOIN: It is so ordered.

Are there any further resolutions to be introduced?

If not, the Chair will remind you that every member of the House of Delegates has not only the right and

privilege, but the actual duty to appear before the Reference Committees that have in charge any resolution in which that member is interested. The places of meeting of the Reference Committees will be posted upon the bulletin board. . . .

I will ask Dr. Ayres to indicate the hour at which Reference Committee Number 3 will meet?

DR. AYRES: It will meet immediately following the adjournment of this session.

DR. GEISTWEIT: Reference Committee Number 2 will meet at 9:30 tomorrow morning.

SPEAKER GOIN: We urge you to attend these meetings and say what you have to say about these resolutions.

Is there any further business to come before the House? If not, I would like to say that the House will convene tomorrow at one o'clock. We really will convene at one o'clock, as we have some work to do. It is going to take a long time, so please be prompt.

If there is no further business, the Chair will entertain a motion to adjourn?

DR. L. A. ALESEN: I move we adjourn.

DR. JAMES C. DOYLE: I second the motion.

The motion was put to a vote and it was unanimously carried.

SPEAKER GOIN: It is so ordered.

The House will convene tomorrow at one o'clock.

The House stands adjourned.

The House recessed at 3:00 P.M., Sunday, May 2nd, 1943, to reconvene Monday, May 3rd, 1943, at 1:00 P.M.

* * *

Second Meeting, Monday Noon, May 3, 1943, in the Music Room, Hotel Biltmore

The Second Meeting of the House of Delegates of the California Medical Association was held in the Music Room of the Biltmore Hotel, Los Angeles, California, Monday, May 3, 1943. The meeting was called to order at 1:15 P.M. by the Vice-Speaker, Dr. E. Vincent Askey of Los Angeles.

VICE-SPEAKER ASKEY: The House will please come to order. Those of you who have not signed your cards and wish to be seated, please sign your cards at once.

I will call for the Report of the Committee on Credentials to see whether or not we have a quorum present. Dr. Hoffman.

DR. EUGENE HOFFMAN: Mr. Speaker, the Credentials Committee begs to report that more than thirty-five delegates, the minimum number necessary for a quorum, have been registered.

Mr. Secretary, is there a quorum present?

SECRETARY KRESS: A quorum is present.

VICE-SPEAKER ASKEY: There being a quorum of this House present, the meeting is hereby called to order and we are in business session.

We will now proceed to the Roll Call of Delegates, so that each delegation may seat additional members if there is a deficiency in their numbers. The way it will be handled will be that the Secretary will call the Roll at this time, and if there is no answer from the Roll Call at this time an alternate from the county or the chairman from the delegation may seat an alternate. We will proceed in this manner and then, at the finish of the Roll Call, there will be no need to retrace our steps.

Mr. Secretary, will you proceed with the Roll Call and the seating of the delegates.

The Roll was called by Secretary Kress, and the delegates and alternates were seated.

SECRETARY KRESS: Mr. Speaker, the Roll Call is completed.

VICE-SPEAKER ASKEY: The Report of the Secretary and the Roll Call being completed, I hereby declare this House duly constituted and ready for business.

The next order of business will be an announcement by our Secretary in regard to the place for our 1944 Annual Session.

SECRETARY KRESS: Mr. Speaker: The Council has decided to postpone its decision concerning the place of meeting for next year's Annual Session. The session, if and when and where held, will be dependent upon contingencies that may come into being during the coming year.

VICE-SPEAKER ASKEY: You have heard the Report of the Secretary in regard to the action of the Council.

We will now proceed with the next order of business, which is the election of your officers.

Reference Number 16:

Election of Officers

VICE-SPEAKER ASKEY: The first office to be elected is that of the *President-Elect* for the coming year. Are there any nominations for this office?

Election of President-Elect Lowell S. Goin

DR. EDWARD M. PALLETTE (Los Angeles): The California Medical Association House of Delegates has had only a few Speakers, but each time that Speaker has eventually been elected President of the Association. I am going to ask you at this time to continue that custom.

Dr. Lowell S. Goin was born in Iowa. Incidentally, Los Angeles is the Iowa City in America, so that he has plenty of fellow countrymen who speak his language. Dr. Goin prepared for premedical at the University of Iowa and he graduated from the Medical University of St. Louis in 1911. Then, after the usual internship and residence, he followed in the footsteps of Dr. Hertler of the Middlewest, and became a horse-and-buggy country practitioner in Iowa.

Then the World War came on, and Dr. Goin was made a Captain in the Medical Corps, serving 18 months in France, doing x-ray work which he had taken up before the war. After the war, he worked as a resident student at Battle Creek Sanitarium for two years. He served one year doing x-ray work at Frankfort, Germany.

Then he saw the stars of destiny in the Middlewest, and came to God's country where he has for twenty years been doing roentgenology. We are all familiar with Dr. Goin's work in Organized Medicine. He has put in a tremendous lot of time for a number of years most effectively.

We have all attended many meetings but I am sure that we have never attended any meetings where the business was conducted any more efficiently, and more promptly and fairly than it has been conducted in this House of Delegates in recent years.

I take great pleasure in nominating Dr. Lowell S. Goin, of Los Angeles, for the office of President-Elect of the California Medical Association. (Applause.)

VICE-SPEAKER ASKEY: You have heard the nomination. Are there any other nominations for this office?

It was moved, seconded and carried the nominations be closed, and that the Secretary cast the ballot.

VICE-SPEAKER ASKEY: The nominations are closed—how will you vote?

The vote was taken by acclamation and it was unanimously carried that Dr. Lowell S. Goin be elected President-Elect.

VICE-SPEAKER ASKEY: The Chair declares Dr. Goin elected President-Elect of the California Medical Association.

ciation. At this time I wish to present to you your Speaker of the House—Dr. Lowell S. Goin. (Applause.)

Dr. Goin assumed the chair.

Election of Speaker E. Vincent Askey

SPEAKER GOIN: The next order of business is the election of a Speaker of the House of Delegates. The Chair will now hear nominations.

DR. CARL L. MULFINGER (Los Angeles): Quite some years ago in the foothills of Western Pennsylvania, it was my privilege to be in a small college with the man about to be nominated the Speaker of the House of Delegates. I admired him because he played end at football and weighed about 140 pounds. This small college had to buck up against colleges like Dartmouth and Cornell, Pittsburgh and what have you, but, irrespective of the opposition, he was right there and played the game to the end.

Ever since then he has been playing the game for all it is worth. He is known to most of the men here in this State for his services to Organized Medicine. He is not only known to us here in the Southern end of the State for his services to Organized Medicine, but for his services to his community as an outstanding member and president of the Board of Education of the city of Los Angeles.

It is a pleasure for me to nominate Dr. Vincent E. Askey for Speaker of the House of Delegates. (Applause.)

SPEAKER GOIN: Dr. E. Vincent Askey is nominated. Are there any other nominations for this office?

If there are none, the Chair will declare the nominations closed. Hearing none, they are closed.

By acclamation, a vote was taken and Dr. E. Vincent Askey was unanimously elected.

SPEAKER GOIN: It is carried and so ordered. Dr. E. Vincent Askey is elected to that office. (Applause.)

Election of Vice-Speaker L. A. Alesen

Nominations are now in order for the office of Vice-Speaker of the House of Delegates.

DR. CARL R. HOWSON (Los Angeles): Mr. Speaker and Delegates: For the office of Vice-Speaker of the House of Delegates I would like to place in nomination the name of Dr. L. A. Alesen, the present Secretary of the Los Angeles County Medical Association. Dr. Alesen needs no introduction to this group. For the last several years he has been Secretary of our Association and has proved himself a very outstanding Secretary. He has made a little name for himself as an editorial writer, which is incidental to his ability as a parliamentarian. For 15 years he has represented one of the medical schools in Los Angeles in their Department of Surgery, and, as far as we are concerned, particularly the Los Angeles County delegation, he has never done anything but put up a valiant fight for the good name of Medicine.

I consider it a pleasure to nominate Dr. Alesen for Vice-Speaker.

SPEAKER GOIN: Dr. L. A. Alesen has been nominated for Vice-Speaker.

DR. WILCOX: I take pleasure in seconding that nomination.

SPEAKER GOIN: Are there any further nominations? If there are none, the Chair will declare the nominations closed. Hearing none, they are closed. How will you vote?

A vote was taken by acclamation and Dr. Alesen was unanimously elected as Vice-Speaker.

SPEAKER GOIN: Dr. Alesen is declared elected to the office of Vice-Speaker.

Reference Number 17:

Election of District Councilors: Harry E. Henderson, Santa Barbara (for 3rd District); John W. Cline, San Francisco (for 6th District); John W. Green, Vallejo (9th District); and Lloyd E. Kindall, Oakland (7th District)

The next order of business is the election of District Councilors. The first vacancy is in the Third District, Dr. Harry E. Henderson of Santa Barbara, incumbent, term expiring. Mr. Secretary, do you have a nomination in writing?

SECRETARY KRESS: Mr. Speaker, Dr. Harry E. Henderson is the nominee of the Delegates of the Third District.

SPEAKER GOIN: A vote was taken by acclamation and Dr. Harry E. Henderson was unanimously elected Councilor for the Third District.

SPEAKER GOIN: The next vacancy is in the Sixth District, Dr. John W. Cline, incumbent, term expiring. Mr. Secretary, do you have a nomination in writing?

SECRETARY KRESS: Mr. Speaker, Dr. John W. Cline has been nominated by the delegation of the Sixth District.

SPEAKER GOIN: We will now proceed to elect the Councilor from the Sixth District.

A vote was taken by acclamation and Dr. John W. Cline was unanimously elected Councilor for the Sixth District.

SPEAKER GOIN: There is a vacancy in the Ninth District, Dr. John W. Green, Vallejo, incumbent, term expiring. Mr. Secretary, do you have a nomination in writing?

SECRETARY KRESS: Mr. Speaker, Dr. John W. Green has been nominated by the delegation from the Ninth District.

SPEAKER GOIN: Are there any other nominations? Hearing none, I declare the nominations closed.

A vote was taken by acclamation and Dr. John W. Green was unanimously elected Councilor for the Ninth District.

SPEAKER GOIN: There is a vacancy occurring by occasion of the regrettable death of Dr. Frank R. Makinson, Councilor of the Seventh District. Nominations are now in order to fill the unexpired term of Dr. Makinson.

SECRETARY KRESS: Mr. Speaker, Dr. Lloyd Kindall has been nominated to fill the unexpired term of the late Dr. Makinson.

There being no further nominations, a vote was taken on the nomination and it was unanimously carried.

SPEAKER GOIN: I hereby declare Dr. Kindall duly elected to that office.

Reference Number 18:

Election of Councilors-at-Large: Dewey R. Powell, Stockton; and Edward B. Dewey, Pasadena

The next order of business is the election of the Councilors-at-Large, Dr. Dewey R. Powell of Stockton, term expiring. These nominations must come from the floor.

DR. RAYMOND L. OWENS (San Joaquin County): I nominate Dr. Dewey R. Powell to succeed himself.

SPEAKER GOIN: Dr. Powell is nominated to succeed himself. Are there any further nominations? If not, the Chair will declare the nominations closed.

A vote was taken on the nomination and Dr. Powell was unanimously elected.

SPEAKER GOIN: Dr. Powell is elected to succeed himself as Councilor-at-Large.

The next is the election of a Councilor-at-large to fill the vacancy of Dr. Edward B. Dewey of Pasadena, term expiring.

DR. E. T. REMMEN: Mr. Speaker and Members of the House: Three years ago at Coronado there were two candidates for a certain vacancy for Councilor-at-large. I was one and the delegate from Pasadena was the other. After the campaign, when the votes had been counted, the delegate from Pasadena had the largest number of ballots. He has been an able Councilor, studious, thoughtful and faithful. I ask the privilege, Mr. Speaker, of placing in nomination to succeed himself, Dr. Edward B. Dewey of Pasadena.

SPEAKER GOIN: Dr. Edward Dewey is nominated. Are there any further nominations? If there are none, the Chair will declare the nominations closed.

A vote was taken on the nomination and Dr. Dewey was unanimously elected to succeed himself.

SPEAKER GOIN: Dr. Edward B. Dewey of Pasadena is hereby declared elected to succeed himself.

Dr. Askey assumed the Chair.

Reference Number 19:

Election of Delegates to the American Medical Association: Dwight L. Wilbur, San Francisco (1944-1945); Lyell C. Kinney, San Diego (1944-1945); Lowell S. Goin, Los Angeles (1944-1945); Henry S. Rogers, Petaluma (1944-1945); Lowell S. Goin, Los Angeles (1943); William H. Kiger, Los Angeles (1943-1944)

VICE-SPEAKER ASKEY: The next item of business is the election of Delegates to the American Medical Association convention from the California Medical Association.

The first will be that of Dwight L. Wilbur of San Francisco, term expiring. Are there any nominations for this office?

DR. CHARLES A. NOBLE, JR. (San Francisco): I would like to place in nomination the name of Dr. Dwight L. Wilbur to succeed himself.

VICE-SPEAKER ASKEY: You have heard the nomination. Are there any other nominations? Hearing none, the Chair will declare the nominations closed. Dr. Dwight L. Wilbur is nominated as a Delegate from this Association to the American Medical Association.

A vote was taken on the nomination and Dr. Dwight L. Wilbur was elected.

VICE-SPEAKER ASKEY: Dr. Wilbur is declared elected.

(Note. In similar manner, other delegates whose names appear above, were nominated and elected for service for the calendar years indicated.)

Reference Number 20:

Election of Alternate Delegates to the American Medical Association: L. R. Chandler, San Francisco (To Delegate Wilbur, 1944-1945); Bon O. Adams, Riverside (To Delegate Kinney, 1944-1945); Leo J. Madsen, Santa Monica (To Delegate Goin, 1944-1945); Robert S. Stone, San Francisco (To Delegate Rogers, 1944-1945); Robert T. Legge, Berkeley (To Delegate Ewer, 1943-1944); Donald G. Tollefson, Los Angeles (To Delegate Kiger, 1943-1944)

VICE-SPEAKER ASKEY: The next will be the election of the Alternates to the American Medical Association. The first is that of Dr. L. R. Chandler of San Francisco who is Alternate to Dr. Dwight L. Wilbur.

DR. NOBLE (San Francisco): I want to place in nomination the name of Dr. L. R. Chandler to succeed himself as Alternate.

VICE-SPEAKER ASKEY: You have heard the nomination of Dr. Chandler to succeed himself. Are there any further nominations? If not, the Chair declares the nominations closed.

A vote was taken on the nomination of Dr. Chandler and it was unanimously carried.

VICE-SPEAKER ASKEY: Dr. Chandler is declared elected.

(Note. In similar procedure, the other alternates were elected by acclamation.)

Reference Number 21:

Announcement and Approval of Members of Standing Committees Elected by the Council

We will now have by the Secretary the Announcement and Approval of Members of Standing Committees elected by the Council. Mr. Secretary.

SECRETARY KRESS: The Council's Committee on Committees (Doctors Green, Rogers and Emmons) has made the following recommendations for existing vacancies (the same being for three year terms on standing committees):

Committee on Associated Societies and Technical Groups,

Dr. John V. Barrow (Chairman).

Committee on Health and Public Instruction,

Dr. J. C. Geiger, San Francisco.

Committee on History and Obituaries,

Dr. Hyman Miller, Los Angeles.

Committee on Hospitals, Dispensaries and Clinics,

Dr. Benjamin W. Black, Oakland.

Committee on Industrial Practice,

Dr. Carl L. Hoag, San Francisco.

Committee on Medical Defense,

Dr. Lewis T. Bullock, Los Angeles.

Committee on Medical Economics,

Dr. Edward C. Pallette, Los Angeles.

Committee on Medical Education, and Medical Institutions,

Dr. William J. Kerr, San Francisco.

Committee on Membership and Organization,

Dr. L. H. Redelings, San Diego.

Committee on Postgraduate Activities,

Dr. Frank Clough (Chairman), San Bernardino.

Committee on Publications,

Dr. George W. Walker (Chairman), Fresno.

Committee on Public Policy and Legislation,

Dr. Edmund T. Remmen, Glendale.

Advisory Committee to Above,

Dr. Junius B. Harris (Chairman), Sacramento,

Dr. H. R. Madeley (Vice-Chairman), Vallejo.

Committee on Scientific Work,

Dr. Fletcher B. Taylor, Oakland.

Editorial Board.

In addition, there have been some changes on the Editorial Board. Dr. Albert J. Scholl of Los Angeles, has been made Chairman of the Executive Committee of the Editorial Board.

During the coming year, Dr. Ernest H. Warnock takes a place on Anesthesiology; Dr. Fred B. Clarke in General Medicine and Dr. Garnett Cheney in General Medicine; Dr. William P. Kroger in General Surgery; William C. Deamer in Pediatrics; Dr. Alvin J. Cox in Pathology, and Dr. Maurice L. Tainter in Pharmacology.

VICE-SPEAKER ASKEY: You have heard the report of the Council Committee as read by the Secretary. For your information, these Committeemen are nominated and elected by the Council subject to approval by this House. You may either move that the report be approved in its entirety or you may take it individually. Which is your wish at this time?

DR. MADSEN: I move it be approved as a whole.

DR. BRUCK: I second the motion.

VICE-SPEAKER ASKEY: Is there any discussion on this motion?

There being no discussion on the motion, it was put to a vote and unanimously carried.

VICE-SPEAKER ASKEY: The nominations by the Council are hereby approved.

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VICE-SPEAKER ASKEY: Mr. Speaker, I will return the chair to you.

Speaker Goin assumed the chair.

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Reference Number 22:

Report of the Committee on Awards in Scientific Exhibit Division

SPEAKER GOIN: The secret committee appointed to pass on Scientific Exhibits has made the following awards:

No. 1—Division of Military Exhibits, first prize consisting of \$50.00 and an engraved and framed certificate; to the United States Navy.

Honorable Mention. Office of Naval Officer Procurement for Southern California.

Honorable Mention. Office of Naval Officer Procurement for Northern California.

No. 2—\$50.00 and an engraved and framed certificate to the Emergency Medical Division of the State Council of Defense.

No. 3—Health Problems in Wartime—first prize of \$50.00 and an engraved and framed certificate for the exhibit on nutrition problems, presented by the University of California.

* * *

REPORTS OF REFERENCE COMMITTEES

SPEAKER GOIN: The next order of business is the presentation of the Reports of the Reference Committees.

Reference Number 23:

REPORT OF COMMITTEE NO. 1: ON "REPORTS OF OFFICERS AND STANDING COMMITTEES"

(J. Frank Doughty, Tracy, Chairman; H. D. Neufeld, Contra Costa; Deon A. Crew, San Luis Obispo.)

SPEAKER GOIN: Number 1 is the Committee No. 1, with report on "Reports of Officers and Standing Committees." Dr. J. Frank Doughty of San Joaquin County is Chairman. Dr. Doughty.

REPORT OF REFERENCE COMMITTEE NO. 1

Dr. J. Frank Doughty, Chairman

Mr. Speaker and Members of the House of Delegates: We are trying to streamline our report today:

Report of the President:

President William R. Molony, Sr., like every good leader in wartime, has been at the head of his organization, facing with courage and intelligence the many complex and serious problems of the medical profession and the general welfare. His report is recorded in full in the "Pre-Convention Bulletin," but his deeds far exceed his modest report.

I move the adoption of this section of the report.

DR. BRUCK: I second the motion.

The motion was put to a vote and unanimously carried.

SPEAKER GOIN: It is so ordered.

DR. DOUGHTY:

Reports of the Officers of the California Medical Association:

The Reports of the Officers of the California Medical Association show that each has faithfully discharged his obligations, and has given of his time and effort to the furtherance of the cause of Organized Medicine.

I move the adoption of the reports of the following officers as recorded in the "Pre-Convention Bulletin":

Report of the President-Elect,

Report of the Past-President,

Report of the Speaker of the House of Delegates,

Report of the Vice-Speaker,

Report of the Chairman of the Council.

DR. DOYLE: I second the motion. . . .

(Note. The usual motions were made to accept the sections as read. In what follows, the formula of such proceedings will not be repeated in this printed report.)

Report of the Executive Secretary:

Revenues during the fiscal year were \$1,483.00 above the year's budget. This increase, with a gain of \$14,010.00 in unexpended budget items, plus a budgeted surplus of \$33,012.00, made it possible for the Association to expend \$57,405.00 on the Basic Science Act, with the minimum drain on accumulated surplus funds. CALIFORNIA AND WESTERN MEDICINE was produced for \$4,688.00 less than the expenditure for 1941. The increased membership dues for 1943, together with other budgetary plans, will probably offset the loss of dues from members in the military service, and increase costs of operation. The loss on the publication of the JOURNAL in 1942 was \$574.00 as compared with the loss of \$4,535.00 for 1941. Revenue from technical exhibits in 1942 were sufficient to cover the entire cost of the Annual Session, and leave a surplus of \$1,384.00. Active service has been rendered to the Procurement and Assignment Committee. An effort has been made to maintain a cordial relationship with the newspaper publishers, but there has been no definite plan of public relations by the Association.

I move the adoption of this section of the report. . . .

DR. CASS: Second the motion.

The motion was put to a vote and it was unanimously carried.

SPEAKER GOIN: It is so ordered.

Reference Number 24: (See 32.)

Recommendation of a Public Relations Plan:

DR. DOUGHTY: It seems to Reference Committee No. 1 that this Association should have a well-defined plan of public relations with definite objectives, and with established technique. It recommends that the Council of the Association give serious consideration to such a program, and that the carrying out of this program be assigned as one of the duties of the Executive Secretary. We suggest that one of the weaknesses in our present organization is the absence of executive secretaries in most of

our County Medical Societies; and the fact that the President and Secretary in most of the County Medical Societies are not trained in the proper technique of organization work or public relations. We respectfully suggest that the Council work out a plan for such training, and that it might become a duty of the Executive Secretary of the California Medical Association.

No action taken.

Reference Number 25: (See 2 and 35.)

Report of Legal Department (Re Industrial Fee Schedule):

The Report of the Legal Department is concerned chiefly with the effort being made to procure a modernized and adequate fee schedule. We wish, therefore, to present the following resolution:

WHEREAS, The fee schedule approved by the Industrial Accident Commission became effective June 1, 1920, nearly twenty-three (23) years ago; and

WHEREAS, The fees were minimum at that date, but are now totally inadequate; and

WHEREAS, Part of the inadequacy is due to the lack of a fee schedule which covers certain specific procedures; therefore be it

Resolved:

First:—That the Legal Counsel and the Committee on Industrial Practice be empowered to proceed with all measures necessary to procure the adoption of the increase in industrial accident fees as outlined by the Committee.

Second:—That the complete list of the 547 procedures and operations, as drawn up by the Committee, together with the fees therefor as allowed at the present inadequate rate, be sent to every member of the California Medical Association. This will partly offset the loss now sustained by the medical profession due to their lack of understanding of the specific procedures which can be charged for under the present fee schedule.

Third:—That the Legal Department outline the procedure necessary for the proper presentation of a claim to the Industrial Accident Commission for services rendered, the fee for which has been contested.

I move the adoption of this section of the report.

DR. MADSEN: I second the motion.

SPEAKER GOIN: It has been moved and seconded that the House adopt this section of the report, making the resolution proposed the action of the House of Delegates. Is there any discussion?

There being no discussion, the motion was put to a vote and it was unanimously carried.

SPEAKER GOIN: It is so ordered.

Reports of the Standing Committees of the C.M.A.:

DR. DOUGHTY:

The formal reports of the Standing Committees are given in full in the "Pre-Convention Bulletin." It appears that these are largely routine, and that the duties of many of the Standing Committees, with few exceptions at the present time, are very minor. Many of these committees held no meetings during the year. It is realized that the written reports of the committees which did have duties to perform, do not represent a full recitation of the work that they did.

I move the adoption of the reports of the following Standing Committees, as printed in the "Pre-Convention Bulletin":

The Executive Committee,
The Auditing Committee,
Committee on Public Policy and Legislation,
Committee on Associated Societies and Technical Groups,
Committee on Health and Public Instruction,
Committee on History and Obituaries,
Committee on Industrial Practice,
Committee on Medical Economics,

Committee on Medical Education and Medical Institutions,

Committee on Medical Defense,

Committee on Publications,

Committee on Postgraduate Activities,

Committee on Membership and Organization,

Committee on Public Relations,

Committee on Physicians' Benevolence,

Cancer Commission.

I move the adoption of this section of the report. . . .

Reference Number 26: (See 9 and 44.)

Committee on Scientific Work:

This committee has done an excellent job of concentrating a good program into a short period of time for this session. Its recommendation for changing the scope and the name of the "Section on Industrial Medicine and Surgery" to the "Section on Preventive and Industrial Medicine and Public Health" has our endorsement.

I move the adoption of this section of the report.

DR. WEBER: Second the motion.

SPEAKER GOIN: Dr. Doughty, will you read that last sentence again. It seems to conflict with the pending amendment.

DR. DOUGHTY: It is the recommendation of the Committee on Scientific Work to change the scope and the name of the section on "Industrial Medicine and Surgery" to the section on "Preventive and Industrial Medicine and Public Health."

We have not presented any resolution or motion. It is just a motion to accept the report of the Committee on Scientific Work.

DR. KRESS: Mr. Speaker, the original recommendation is as Dr. Doughty has outlined. However, an amendment has been proposed to the By-Laws which would create a new section, with the name "Section on Public Health." The proposed amendment was submitted by the members in the Industrial Section because they preferred to have their Public Health colleagues carry on their work more as a separate section. It might be desirable if the Committee would delay their report on this point provided the Chairman on the Committee on Scientific Work is willing to withdraw the recommendation previously made in order to be in harmony with the desires of the Section on Industrial Medicine and Surgery.

SPEAKER GOIN: Do you move to amend the report? . . .

DR. CASS: The resolution that was introduced yesterday was that the By-Laws be changed so that a new section on Public Health would be substituted, so I do not think that this recommendation is really in order.

SPEAKER GOIN: The Chair does not believe there is any conflict between this proposed amendment and the motion to adopt this section of the report.

There being no further discussion, the motion was put to a vote and it was carried.

SPEAKER GOIN: The motion is carried and it is so ordered.

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Reference Number 27:

"Round Table" for General Practitioners:

Reference Committee No. 1 suggests that it might be advisable to develop a feature particularly for the general practitioners in future programs. Such a feature: as a round table discussion of practical points, of methods or procedures found useful by the men in this field, a "Minute Man" type of program. It should prove universally interesting and could be tried out on an experimental basis.

*Reference Number 28:***Committee on Public Health Education:**

As published in the "Pre-Convention Bulletin," this committee has completed its work, closed its funds, and asks for a discharge from the House of Delegates.

I move the adoption of this section of the report. I, also, move that the Committee be discharged with honor.

SPEAKER GOIN: Dr. Doughty has recommended that this request be complied with.

DR. DOYLE: I second the motion.

SPEAKER GOIN: Is there any discussion?

There being no discussion, the motion was put to a vote and it was unanimously carried.

SPEAKER GOIN: This section of the report is adopted.

* * *

*Reference Number 29:***Committee on Hospitals, Dispensaries and Clinics:**

The report of this Committee points to the existing problems of the hospitals, and to the work they have done in meeting the extra load.

Reference Committee No. 1 calls attention to the fact that no complete, overall study has been made of the hospital situation which exists in every county of this state. To undertake such a study requires more than the time which can be given by the voluntary effort of busy practitioners of medicine. We, therefore, recommend that the Council direct that such a study be made by paid, full-time, personnel of the Association, so that a united, intelligent and state-wide program, based on facts, may be put into force, with special attention to governmental hospitalization.

I move the adoption of this section of the report.

DR. FITZPATRICK: I second the motion.

SPEAKER GOIN: The adoption of this requires the Council to undertake such a survey.

DR. R. STANLEY KNEESHAW: I feel that such a survey at this time would be inadvisable, in view of the help required to conduct the survey this year.

SPEAKER GOIN: Is there any further discussion? The question is on the adoption of this section of the report.

There being no further discussion, the motion was put to a vote and the motion lost.

SPEAKER GOIN: It appears that this section of the report is deleted from the report.

Committee on Local Arrangements:

This Committee, with L. A. Alesen as Chairman, has done an excellent job of making available the local facilities for this streamlined session. I move that a special resolution of appreciation be adopted.

I move that this section of the report be adopted. . . .

There being no discussion, the motion was put to a vote and it was unanimously carried.

SPEAKER GOIN: Dr. Doughty, I am sure the House joins me in thanking you for a very efficient and intelligent and complete report by Committee No. 1.

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*Reference Number 30:***REPORT OF REFERENCE COMMITTEE NO. 2: COMMITTEE ON REPORTS OF THE COUNCIL AND SECRETARY-TREASURER**

(W. H. Geistweit, Jr., San Diego, Chairman; James C. Doyle, Beverly Hills, and E. C. Halley, Sanger.)

DR. GEISTWEIT:

MR. SPEAKER AND MEMBERS OF THE HOUSE OF DELEGATES: Your Committee has considered the various re-

ports and resolutions referred to it and makes the following report:

Item 1. Report of the Council:

Your Committee has no comments to make and recommends that the report be accepted as read and ordered filed.

I move the adoption of this section of the report.

DR. BRUCK: Second the motion.

SPEAKER GOIN: Is there any discussion?

There being no discussion, the motion was put to a vote and it was unanimously carried.

SPEAKER GOIN: This section of the report is adopted.

*Reference Number 31:***Item 2. Report of the Secretary-Treasurer:**

The Committee has considered this report and recommends that the House of Delegates instruct the Secretary-Treasurer to continue the *publication of the complete reports of the Certified Public Accountants*. I so move.

DR. BRUCK: I second the motion.

The motion was put to a vote and it was unanimously carried.

SPEAKER GOIN: That section of the report is adopted.

DR. GEISTWEIT:

Your Committee has studied the report of the Certified Public Accountants and wishes to commend the Secretary-Treasurer especially on the reduction of the administrative expenses, and the reduction of the expenses of the OFFICIAL JOURNAL.

In the study of the Accountant's report, your Committee notes the matter of *Past Due Notes from the California Physicians' Service*. Your Committee recommends that these notes be brought up to date under direction of our Legal Counsel, and that a formal written report on their status be made annually to the Council of the California Medical Association by the Legal Counsel.

I move the adoption of this section of the report.

DR. BRUCK: I second the motion.

SPEAKER GOIN: Is there any discussion?

There being no discussion, the motion was put to a vote and it was unanimously carried.

SPEAKER GOIN: It is adopted.

DR. GEISTWEIT: Your Committee recommends that the report of the Secretary-Treasurer be accepted and ordered filed. I so move.

DR. DOYLE: Second the motion.

*Reference Number 32: (See 24.)***Item No. 3. Report of the Executive Secretary:**

I find that there has been a conflict with our Committee and Committee Number 1 inasmuch as the Report of the Executive Secretary was also referred to us. We have a recommendation in regard to that report which I am sure does not conflict with the recommendation of Committee Number 1. I will read it.

Your Committee has also studied this report, and with reference to Item No. 6 thereof, recommends that the House of Delegates instruct the Council to appoint a subcommittee of its own members, to be called the *Public Relations Publicity Committee*, said committee to cooperate with and advise with the Secretary of the Association and the Executive Secretary for the purpose of carrying on a consistent campaign in behalf of the best interests of the medical profession and general public health. I so move.

DR. BRUCK: Second the motion.

SPEAKER GOIN: Is there any discussion?

DR. BRUCK: I would call your attention to the fact that in the report of Committee No. 1 that section was not acted upon by the House.

DR. GEISTWEIT: I stand corrected.

SPEAKER GOIN: Is there any further discussion on the adoption of this section of the report?

There being no further discussion, the motion was put to a vote and carried.

SPEAKER GOIN: That section of the report is adopted.

Reference Number 33:

Item 3(A). Annual Conference of County Society and State Association Officers:

It is recommended that the Council call an *Annual Meeting of the Presidents and Secretaries of the various County Medical Societies*, a major topic for consideration at these meetings to be the subject of public health publicity. It is suggested that *one meeting be held in the North and one in the South*. This is purely a recommendation without a motion from the Committee.

SPEAKER GOIN: Dr. Geistweit, if the report as a whole is adopted, this recommendation is adopted. This would call for an expenditure of money.

DR. GEISTWEIT: I move the adoption of this section of the report.

SPEAKER GOIN: The motion is on the adoption of this section of the report.

DR. BRUCK: I second the motion.

SPEAKER GOIN: Is there any discussion? This recommendation will require the Council to call an annual meeting of the Presidents and Secretaries of the various County Medical Societies.

DR. CASS: Is this in addition to the annual meeting when the Secretaries of all the County Societies meet with the members of the Standing Committees?

DR. GEISTWEIT: This really is a substitute for that. This year that meeting was not held, and your Committee feels that we should have that meeting annually, but split it up, as suggested, because of difficulties of travel at the present time.

DR. MOODY: Would a motion be in order to amend this by making it contingent upon the exigencies of the war emergency and travel?

SPEAKER GOIN: Yes, I believe so.

DR. ANDERSON: I second the motion.

SPEAKER GOIN: *The amendment is that the recommendation of the Committee be subject to the exigencies of war*; that is to say, if it is not practical to have the meeting, the Council is released from its duty of calling the meeting.

Are you ready for the question on the adoption of the amendment?

A vote was taken on the amendment and it carried.

SPEAKER GOIN: The question is now on the adoption of the motion as amended.

A vote was taken on the motion as amended and it was unanimously carried.

SPEAKER GOIN: It is so ordered.

DR. GEISTWEIT: The report of the Executive Secretary has already been adopted by previous motion, so it is unnecessary to make an additional motion.

Reference Number 34:

Item 4. Report of the Editor:

Your Committee has considered the report of the Editor. It recommends that the report be accepted and ordered filed. I so move.

DR. BRUCK: I second the motion.

SPEAKER GOIN: Is there any discussion?

There being no discussion, the motion was put to a vote and it was unanimously carried.

SPEAKER GOIN: This section is adopted.

Reference Number 35: (See 2 and 25.)

Item 5. Industrial Commission Fee Schedule:

Your Committee has also considered the resolution referred to it concerning the present inadequate fee schedule of the California Industrial Accident Commission. It recommends that the House of Delegates adopt that resolution. I might say that is, also, along the line of the recommendation of the previous committee; however, I feel it covers other phases of the subject, and in due order I have here the copy of the resolution as referred to us by the Council, as an addendum to its Report. I will read the resolution.

Resolved, That the House of Delegates of the California Medical Association hereby reiterates its disapproval of the present inadequate fee schedule of the California Industrial Accident Commission, adopted nearly twenty-three years ago, and respectfully requests the Industrial Accident Commission to adopt the revised fee schedule submitted by the California Medical Association to the Commission on October 16, 1942, as amended; and be it further

Resolved, That the California Medical Association hereby expresses its unqualified disapproval of any practices under Workmen's Compensation laws involving the rebating of fees in any form or manner, the payment of physicians on the basis of a percentage of premiums collected, or otherwise, at a rate less than the fee schedule established by the Industrial Accident Commission; and be it further

Resolved, That a special committee of three, to be appointed by the Chairman of the Council, is hereby created to represent the California Medical Association in all matters relating to Workmen's Compensation practice, and to carry into effect the policies hereinabove set forth.

I move its adoption.

SPEAKER GOIN: We have had a motion for its adoption.

DR. BRUCK: I second the motion.

SPEAKER GOIN: Is there any discussion?

The question is on the adoption of Item Number 6, including this resolution.

DR. MADSEN: How does this conflict with or coincide with the previous Committee's report?

DR. GEISTWEIT: It really doesn't.

DR. MADSEN: You are here creating a committee which was not created by the previous resolution.

SPEAKER GOIN: It is the opinion of the Chair that there is no conflict; that the first resolution established the principle and this resolution somewhat activates that principle. So far, I don't believe there is any conflict.

DR. CASS: The first resolution gave the Standing Committee on Industrial Practice the job that this resolution is giving to a new committee.

SPEAKER GOIN: Then there is a conflict in that connection. The Chair will entertain a motion to amend this resolution by substituting for the words "special committee" the "Committee on Industrial Practice."

DR. CASS: I so move.

DR. MADSEN: Second the motion.

DR. H. D. NEUFELD (Contra Costa County): If you care to have the first resolution, I have it here.

SPEAKER GOIN: You may read it, Doctor.

Dr. Neufeld read the first resolution as presented by Reference Committee No. 1.

SPEAKER GOIN: That is quite correct. It does direct that a special committee of three be appointed by the Chairman of the Council. That would actually create

two committees doing the same job. I think that, in order to preserve Dr. Cass's amendment, the words "special committee of three" be deleted, and the words, "Committee on Industrial Practice," be substituted. That would accomplish your objective.

The question, then, is on the amendment. The amendment is to strike out the words "special committee of three," and substitute the words, "The Committee on Industrial Practice"; otherwise, the resolution is unchanged.

Is there any discussion?

The motion was put to a vote and it was unanimously carried.

SPEAKER GOIN: The amendment is carried. The question is now on the adoption of the report as amended in reference to this particular section. This section of the report includes this resolution as amended.

The motion to adopt that section of the report, including the resolution, was put to a vote and unanimously carried.

Reference Number 36: (See 12.)

Item 6. Resolution No. 8, Regarding Councilor Districts:

Resolution No. 8 was also referred to your Committee. After due consideration, your Committee recommends that a resolution be adopted as follows:

Resolved, That the House of Delegates, in accordance with the By-Law provisions, reaffirm or modify the existing arrangements of Councilor districts.

I move its adoption.

DR. CASS: I second the motion.

There being no discussion, the motion was put to a vote and unanimously carried.

SPEAKER GOIN: This section is adopted.

* * *

DR. GEISTWEIT: Mr. Chairman, I move the adoption of the Committee's report as amended.

DR. CASS: I second the motion.

SPEAKER GOIN: The question is on the adoption of the report as a whole as amended.

The question was put to a vote and the motion was unanimously carried.

SPEAKER GOIN: The report as a whole is adopted as amended.

SPEAKER GOIN: Thank you, Dr. Geistweit.

* * *

The slight conflict is due to the fact that our Constitution and By-Laws make no provision for referring the Report of the Executive Secretary. It seems logical that it should be referred to the same committee to which the report of the Secretary goes. Just for the sake of establishing a precedent, the Chair is now going to rule, the House concurring, that hereafter the *Executive Secretary's Report* shall be referred, with the Association Secretary-Treasurer's Report, to Reference Committee Number 2. Is there any dissension? If not, I think that may establish a precedent for future disposal of that report.

* * *

I will now call for the Report of Reference Committee Number 3.

Reference Number 37:

REPORT OF REFERENCE COMMITTEE NO. 3: ON RESOLUTIONS, AMENDMENTS TO THE CONSTITUTION AND BY-LAWS, AND NEW AND MISCELLANEOUS BUSINESS

(Dr. Samuel Ayres, Jr., Los Angeles, Chairman; Thomas A. Card, Riverside, and John Hunt Shepard, San Jose)

MR. SPEAKER and Members of the House of Delegates of the California Medical Association: The members of Reference Committee Number 3 want to express their thanks to the members of the Association who came before the Committee and expressed their views, pro and con, on the various items of New Business that were introduced.

The shortness of time, owing to the telescoping of the convention into two days, has made it impossible to get this work finished in time to have the resolutions mimeographed.

The Committee has attempted to summarize the resolutions in their recommendations, and in the event that anyone cares to have a resolution read in full, the resolutions are here and can be read if you so desire.

Reference Number 38:

How Annual Session Resolutions Should be Prepared:

The Committee would like to call attention to the proper means of preparing these resolutions. For future Committee's benefit these resolutions should be typed, double space, with three copies. The name of the introducer or the organization sponsoring the resolution should be included, as well as a brief statement of the purpose.

Some of the resolutions came in on little slips of paper, for instance, and another one came in almost all completely scratched out except for about two lines which constituted the resolution. There is no reason for leaving it to the ingenuity of the Committee as to what is wanted. It is rather important that these resolutions be in proper form in order to expedite the matter that is handled.

Reference Number 39: (See 6 and 41.)

Physicians' Benevolence Fund:

The proposed amendment to the Constitution amending Section 1, Article XI, having been duly presented to the House of Delegates and published according to the requirements, reads as follows:

"Resolved, That Section 1 of Article XI of the Constitution of this Association, California Medical Association be and the same hereby is amended, by adding to said Section at the end thereof, the following paragraph:

'At least \$1.00 out of the annual dues paid by each member of the Association shall be allocated to the Physicians' Benevolence Fund and shall only be used for the purposes as set forth in the by-laws.'

The Committee recommends *do pass*. Mr. Speaker, I so recommend.

DR. MADSEN: I second the motion.

SPEAKER GOIN: The question now is on the adoption of this section of the report which amends the Constitution as read in the resolution. Is there any discussion?

There being no discussion, the motion was put to a vote, and it was carried by a two-thirds majority vote.

SPEAKER GOIN: It is adopted by a two-thirds majority.

Reference Number 40: (See 3.)

Resolution No. 1 and Proposed Amendment to the By-Laws. Postgraduate Courses for Military Members and Postgraduate Fund. Therefore:

This resolution provides a fund to be established by earmarking \$2.00 out of each member's annual dues for an indefinite time, the money so allocated to be used in establishing postgraduate refresher courses for colleagues when they return to civilian life from the Armed Forces, in order to more properly fit them for civilian practice.

The Committee is heartily in favor of the ideas expressed in the resolution, but feels that the future needs are indefinite and that further study should be given by

the Council, and hereby recommends that the resolution be referred to the Council for further study and action. I so recommend.

DR. KNEESHAW: I second the motion.

SPEAKER GOIN: The question is on the adoption of this section of the report, which refers this amendment to the Council for further study. Is there any discussion?

There being no discussion, the motion was put to a vote and it was carried.

SPEAKER GOIN: It is adopted.

Reference Number 41: (See 6 and 39.)

Resolution No. 2. Instructions for Physicians' Benevolence Committee:

This resolution simply requests specific instructions from the Council in the matters of policy of the Physicians' Benevolence Committee as to the extent of aid to be dispensed to indigent and needy physicians.

Your Committee recommends *do pass*. I so move.

DR. MADSEN: I second the motion.

SPEAKER GOIN: Is there any discussion?

There being no discussion, the motion was put to a vote and it was unanimously carried.

SPEAKER GOIN: It is carried and the resolution is adopted.

Reference Number 42: (See 7.)

Resolution No. 3. Post-War Plans on Medical Service and Social Security:

In regard to Resolution No. 3 the Committee agrees that the present period of change in our social and economic programs justifies the adoption of this resolution, which would consider post-war plans in reference to medical care and social security, and recommends that the resolution be adopted, with the elimination of the appointment of a special committee for this purpose, and in place thereof instructing the Council of the California Medical Association to study post-war problems and take whatever action may be deemed necessary.

Mr. Speaker, I so move.

DR. KNEESHAW: I second the motion.

There being no discussion, the motion was put to a vote and unanimously carried.

SPEAKER GOIN: It is carried and the section is adopted.

Reference Number 43: (See 8.)

Resolution No. 4. Medical Service Liaison Committee of A.M.A. in Washington, D. C.:

The Committee heartily endorses this resolution, which would in effect establish in Washington, D. C., a Medical Service Committee composed of representative doctors from the membership of the American Medical Association, headed by a competent spokesman who would be in a position to improve public relations between the medical profession on the one hand, and the general public and our representatives in Congress on the other; and who would be available for necessary information which might be required from legislative bodies. Furthermore, such a committee would be in a position comparable to the Legislative Committee of the California Medical Association in Sacramento, and could more easily keep in touch with legislation affecting health and medical problems. The committee especially desires to call attention to paragraph number 6 which states:

"6. The Committee on Medical Service shall establish and maintain an office in Washington, D. C., and shall further be empowered and directed to employ a full-time Executive Director, who shall act as Secretary of the Committee, and whose duties shall be specified by the Committee. Such Executive Director shall be a physician who has been actively engaged in the private practice of

medicine for not less than five years during the previous ten years, and, furthermore, be informed and qualified to act as a Liaison Representative to said Committee."

Your Committee recommends *do pass*, and I so move.

DR. EDWARD HAYES: Second the motion.

SPEAKER GOIN: The adoption of this section of the report adopts a resolution charging the delegates from California with the duty of introducing to the House of Delegates of the American Medical Association a resolution along the lines which Doctor Hayes presented yesterday. I want what we are considering here to be clear. Is there any discussion?

DR. FARR: I think this matter ought to be referred to the Council of the State Association. I so move.

The motion was seconded.

SPEAKER GOIN: It has been moved and seconded that this resolution be committed to the C.M.A. Council. Is there any discussion?

DR. HOFFMAN: I should like to ask if this is a motion to endorse or to order our Delegates to bring this before the House of Delegates of the American Medical Association. Is this a motion to endorse the resolution?

SPEAKER GOIN: The actual resolution in the hands of the Committee instructs the Delegates from California to present this resolution to the House of Delegates. The pending motion is to commit it to the Council. Are you ready for the question? The question is to commit this part of the report to the Council, which Council will not meet before the delegation goes to the American Medical Association meeting.

The motion was put to a vote and the motion lost.

SPEAKER GOIN: The motion is lost. The question now is on the adoption of this section of the report. Is there any discussion?

DR. MOLONY: Let us get this matter clear. If this resolution is adopted by this House, the Delegates from California are instructed to introduce this resolution that carries in effect that this House requests the Delegates of California to vote for it, if it comes up on the floor of the A.M.A. House. This is a very big question. Theoretically, it is very fine, and I am not committing myself or urging it one way or the other. I am not for or against it, except that we all know, and you all know, the very efficient, practical application of the Legislative Committee as it is worked out in California; but the efficiency of our machinery in California is not primarily through our Legislative Committee, but is through other sources. It is the other sources that make up the practical machinery for carrying out the wishes of the California Medical Association in Public Health matters.

If it is possible, and this is my thought in the matter, to have such a nation-wide organization or machinery to be set up by us throughout the United States, or to bring into a national basis what we practically have in California, that would be very fine, but let's look at the matter this way. Supposing we had in Sacramento such an organization, the California Medical Association had a representative and an office in Sacramento. You know very well that you would not get very far. It is only by another method that you accomplish what you are after. I warn you to be very careful about instructing your delegation from California to go back there and vote for something that may not be for the best; otherwise, you tie the hands of the delegation. It is something that requires a great deal of study. The National situation is entirely different from the State situation, and I would ask this House to be most considerate about how they vote to endorse something that has not been thoroughly studied and worked out in a national way.

SPEAKER GOIN: Is there any further discussion? Doctor Blondin.

DR. EDW. A. BLONDIN (San Diego): I move that the Delegation from California go uninstructed in this matter. I think we have confidence enough in them to know they will do the best thing.

SPEAKER GOIN: I do not think the Chair understands your motion. The same effect would be accomplished by deleting this section of the report.

DR. BLONDIN: Dr. Molony has just stated that he feels the Delegation should be instructed as to how they should vote.

SPEAKER GOIN: But, Doctor, if they were uninstructed, it would be the same as deleting this section of the report. I do not think anything is gained by adopting a motion to let them go uninstructed. I will entertain the motion if there is a second. Do I hear a second?

The motion was not seconded.

SPEAKER GOIN: The motion is lost for want of a second.

DR. EDWARD HAYES: As you will recall when I read this resolution before this body yesterday, I called attention to the fact that it had been presented to a body, meeting in Chicago on February 14th, representing 29 different states. The resolution was presented there and adopted by that body and it is to be introduced at a meeting of the House of Delegates of the American Medical Association in June in Chicago. I think there is a little ambiguity in the resolution which was presented here. We do not mean that we would ask the House of Delegates from California or the delegates from California to introduce the resolution, although it is to be introduced. All that the physician sponsors in the Midwest want is the approval of the Houses of Delegates of the various Western state associations on what they are doing.

I might say that the American Hospital Association and the American Dental Association already have such a set-up in Washington, and there seems to be considerable demand for such a set-up on the part of the Medical Association, and requests have come from various representatives in Congress for some source by which we could furnish information on medical subjects. It is the feeling of a good many who have studied this resolution that this is the first real step by the American Medical Association whereby it would go out to take a definite stand, and make known its relationship to the public and to keep Medicine, as far as possible, out of politics.

DR. NOBLE: May I ask a question? What relation would this Committee have with the National Physicians' Committee as it now exists?

DR. KNEESHAW: That was the point I was going to bring up. That has no effect with the National Physicians' Service. That is an entirely different group. We are going to work a different plan than has been worked by the National Physicians' Service. I think you should all be informed that the officers received a letter from this Association asking for support of this movement in our House of Delegates, but that has nothing to do with the National Physicians' Service.

DR. MADSEN: Mr. Chairman, I do not think there is any member sitting in this House of Delegates at the present moment who feels differently than a few of us do about this matter. It is true that our representation in Washington has not been adequate. Whose fault it is, is a matter for this House to consider. It would seem to me fitting that right here we could memorialize our Delegates by passing this resolution endorsing this idea,

but not tying their hands. We have chosen them as Delegates to the American Medical Association, because we think they are capable and competent persons to represent us there in that legislative body. I should like to, if possible, make a motion in a very short form that we endorse in principle what is contained in this resolution and memorialize our Delegates to the American Medical Association to bring about its passage as they see fit.

The motion is seconded.

SPEAKER GOIN: Your amendment deletes this section of the report which instructs the Delegates, and there will be substituted therefor *an endorsement by the House of the principle*. Is that right?

DR. MADSEN: Yes.

SPEAKER GOIN: The question is now on the amendment. Is there any further discussion?

There being no further discussion, the question was called for, a vote was put on the motion to adopt the amendment and the amendment was carried.

SPEAKER GOIN: The amendment is carried. The question is now on the adoption of this section of the report.

The motion to adopt the report was put to a vote and it was adopted as amended.

Reference Number 44: (See 9 and 26.)

Resolution No. 5. Proposed New Section on Public Health:

The Committee appreciates the importance of preventive medicine and public health in the practice of medicine, and in the welfare of the public in the State of California. The desirability of creating a special section on this subject, however, is questioned, inasmuch as the public health officers already have adequate facilities for exchanging their scientific observations. However, the desirability of more closely incorporating those physicians engaged in the practice of preventive medicine and public health with the main body of physicians in the State cannot be too strongly emphasized. The creation of sections of the California Medical Association has been largely patterned after similar sections in the American Medical Association. Since the American Medical Association recognizes a section known as the Section on Preventive and Industrial Medicine and Public Health, your Committee recommends that the resolution be changed to read that, instead of forming a separate section on Public Health, a section be created to be known as the *Section on Preventive and Industrial Medicine and Public Health*.

With this modification the Committee recommends *do pass*, and I so move.

DR. GREEN: I second the motion.

DR. CASS: I have already said just a moment ago when this was brought up, the Section on Industrial Medicine and Surgery does not want its name changed. It has been a very active and aggressive section. Their papers and programs are very good. We invite Public Health to come and join our section, but we do not want the name changed.

SPEAKER GOIN: Is there any further discussion? The question is now on the adoption of this section of the Committee's report to change the name of the Committee on Industrial Medicine and Surgery to Preventive and Industrial Medicine and Public Health. Are you ready for the question?

The question was called for and put to a vote.

SPEAKER GOIN: The Chair is in doubt. Please raise your hands.

A second vote was taken, the members raising their hands.

SPEAKER GOIN: The "noes" have it and the section is deleted.

Reference Number 45: (See 10.)

Resolution No. 6. Revision of A.M.A. Principles of Ethics in Relation to War and Post-War Problems:

Resolution No. 6 recommends that the Council of the California Medical Association bring before the House of Delegates of the California Medical Association at its next Annual Session a revision of the Principles of Medical Ethics of the American Medical Association to deal with war and post-war problems, and to correlate the Codes of Ethics of the various county medical societies.

The Committee is aware of social and economic changes which may make desirable certain changes in the Code of Ethics, but feels that this matter should be referred to the Council for such action as it may deem proper. I so recommend, Mr. Speaker.

DR. WARD: I will second the motion.

SPEAKER GOIN: Is there any discussion?

There being no discussion, the motion was put to a vote and it was unanimously carried.

SPEAKER GOIN: It is carried and it is adopted.

Reference Number 46: (See 11.)

Resolution No. 7. On Appointment of Special Committees of Senior Physicians to Coöperate in Securing Adequate Medical Personnel for the Armed Forces:

Resolution No. 7 relates to the procurement of an adequate supply of medical officers for the Armed Forces of the United States. The intent and purpose of this resolution is considered by the Committee to be quite worthy. However, in the Committee's opinion, the Procurement and Assignment Service has already set up advisory committees in each county medical society; and unless further assistance is requested by the Procurement and Assignment Service, we can see no need for the creation of any further committees, and the Committee recommends *not pass*. I so move.

DR. GREEN: I second the motion.

SPEAKER GOIN: Is there any discussion? The question is on the adoption of this section of the Committee's report.

DR. E. EARL MOODY (Los Angeles): Wasn't there a request from the two Chairmen of the Assignment and Procurement Committees in the State to bring this matter about so as to get more men in the service. They are both here. Maybe they can answer for themselves.

SPEAKER GOIN: Dr. Pallette, what is correct? Has the Procurement and Assignment Office asked for the formation of this committee of the county societies to aid them?

DR. PALLETTE: I am perfectly willing for you to ask Dr. Fletcher. I know what it is in the South. In Los Angeles we could make that a county committee if we wanted to, rather than burden the other 13 counties with an unnecessary committee. My attitude is neutral.

DR. SCHAUPP: I think I can clarify this a little bit. The request came out from Washington that in those cases where a man is declared available by the Procurement and Assignment Service, and he does not apply for a commission in the service, the county should coöperate in bringing pressure upon him, as far as possible, to enter the service. That is not the problem of the Procurement and Assignment as it is now construed, but in each county society there will be a committee or a group instructed to see that these younger, physically able, men are induced, if possible, to join the service. Is that what

you understand, Dr. Ayres? I believe that was the only clause you wanted my help on.

DR. AYRES: I will admit that the only person I spoke to on the matter was Dr. Pallette. He seemed to feel that the situation was satisfactory as it stands. No one appeared before the Reference Committee to discuss the matter. We felt it was not necessary; however, it was up to the wishes of the Delegates.

DR. SCHAUPP: I move that the motion be amended to read *do pass*.

SPEAKER GOIN: Is there a second to the amendment?

DR. SHARP (Monterey County): I second the motion.

SPEAKER GOIN: It has been moved and seconded that the words "do pass" be substituted for the words "Not Pass."

Will you read it again?

DR. Ayres reread that section of the report.

DR. PALLETTE: I do not want to be in the position of being opposed to this. It occurs to me that it is an unnecessary thing for every county to establish such a committee. Thirteen of my fourteen counties are already cleaned out, and there would be nobody in there to go in the service. The committee might conflict with the committees we have already set up. I am perfectly willing that any county that wants a committee should have one, but thirteen out of my fourteen counties do not need it.

SPEAKER GOIN: The question is on the adoption of the amendment. The amendment is to substitute the words "Do Pass" for "Not Pass."

The amendment was put to a vote and the amendment was lost.

SPEAKER GOIN: The question is now on the adoption of that section of the report. Are you ready for the question?

The question was called for, the motion was put to a vote and it was carried.

SPEAKER GOIN: The motion is carried and that section of the report is adopted.

Reference Number 47: (See 13.)

Resolution No. 9. On Procurement of Nurses for the Armed Forces:

This resolution deals with the procurement of nurses for the Armed Forces, and states that present provisions for this purpose are inadequate, and recommends that the Delegates from the California Medical Association to the American Medical Association be instructed to investigate and take steps looking toward the establishment of a Procurement and Assignment Service for nurses.

The Committee feels that this resolution should be passed, but has felt the desirability of making a slight change in the wording as follows:

Resolved, That the Delegates from the California Medical Association to the American Medical Association bring before the House of Delegates of the American Medical Association the advisability of the establishment of a Procurement and Assignment Service for Nurses for the Armed Forces.

With this modification the Committee recommends *do pass*. I so move.

DR. WARD: I second the motion.

SPEAKER GOIN: Is there any discussion?

DR. JOHN HUNT SHEPHERD (Santa Clara County): My understanding is that the procurement of nurses is in the hands of the Red Cross.

DR. BON O. ADAMS (Riverside County): The Federal Government directs the assignment, and we have no direction in that, to my mind.

SPEAKER GOIN: Dr. Gilman will answer Dr. Adams.

DR. GILMAN: The Procurement and Assignment of nurses is not necessarily in the hands of the Red Cross. A nurse may come into the Procurement and Assignment office in San Francisco, and ask to enroll with the Red Cross, but it is not mandatory. This is the procedure in the Navy, but with the Army I believe it is different.

SPEAKER GOIN: Is there any further discussion?

DR. MOLONY: I would like to have clarified by Dr. Ayres as to whether it is the intent of this resolution that he is setting up that it be introduced into the House of Delegates of the American Medical Association by the California delegates? Will you read it again?

DR. AYRES: We did not change the intent of the resolution but merely changed slightly the wording.

DR. Ayres then reread the resolution as contained in the report.

DR. MOLONY: That is just what it says—that the Delegates from California are to introduce and support this resolution. Now, what are we to base this resolution on, what facts and so forth? What is the need of it. I just want some information.

DR. PALLETTE: I move to amend that we approve the spirit of this resolution, and that we request our delegates to introduce such a resolution if it seems in their judgment to be opportune.

SPEAKER GOIN: Is there a second to the proposed amendment?

DR. MOODY: I second the motion to amend.

SPEAKER GOIN: The question is now on the *amendment*, which is that we *endorse in spirit* but deactivate. Are you ready for the question?

The question was called for, the motion to adopt the amendment was put to a vote and it was carried.

SPEAKER GOIN: It is carried. We will now vote on this section of the report as amended.

A vote was taken on the adoption of this section of the report as amended, and it was carried.

SPEAKER GOIN: It is carried.

Reference Number 48: (See 14.)

Resolution No. 10. Relations Between Hospitals and Nurses Regarding Working Hours and Wages:

This resolution deals with the problems arising between nurses and hospitals in the matter of wages and working conditions. Inasmuch as neither the hospital associations nor any official representatives of the nursing groups have requested the California Medical Association to intercede in this matter, and in order that there may be a continuation of the previous friendly relationships between the medical and nursing professions, the Committee considers that this resolution is not in order, and recommends that this resolution be referred to the Council for its consideration. I so move.

DR. GREEN: I second the motion.

SPEAKER GOIN: Is there any discussion?

DR. MADSEN: What is this resolution?

DR. AYRES: The sense of the resolution is that the California Medical Association take upon itself to attempt to smooth out the conflict between the nurses and the hospitals. It seems that there has been some disagreement between the nurses as to working conditions, and they have attempted to do some bargaining. The hospitals, apparently, feel it is not in order. The maker of this resolution wants the California Medical Association to take a hand in the matter, but the Committee felt it was not our business.

SPEAKER GOIN: Are you ready for the question?

The question was called for, the motion to adopt this section of the report was put to a vote, and it was carried.

SPEAKER GOIN: The "ayes" have it and this section of the report is adopted.

Reference Number 49: (See 15.)

Resolution No. 11. On Medical Service to Federal Housing Projects Located in San Diego, and Resolution Thereon from the San Diego County Medical Society:

DR. AYRES: Mr. Chairman, in consideration of Resolution No. 11, I would like to move that the House of Delegates go into Executive Session.

DR. GEISTWEIT: I second the motion.

SPEAKER GOIN: It has been moved and seconded that the House go into Executive Session.

The motion was put to a vote and it was unanimously carried.

SPEAKER GOIN: It is carried and the Chair will again appoint Dr. Madsen and Dr. Doyle to act as Sergeants-at-Arms. The Sergeants-at-Arms will proceed to clear the House, please.

A short recess was taken, during which time the Sergeants-at-Arms cleared the House and it reconvened in Executive Session.

SPEAKER GOIN: The House will now be in order, please. Will the Sergeants-at-Arms report?

DR. DOYLE: The House is in Executive Session.

Executive Session

DR. AYRES: Resolution No. 11. . . .

(Note. The minutes of the proceedings of the Executive Session of the House of Delegates are on file in the office of the California Medical Association. Delegates who were present are in position to give reports to their respective county societies.

The Council of the Association will hold a two-day session on June 19-20, at which time the various problems involved will be given careful consideration. In due course, the component county societies will be given reports thereon.)

. . . DR. AYRES: Inasmuch as the difficulties enumerated in this resolution have not been carried through the proper channels as above stated, and in view of the extreme delicacy of the public relations involved in this resolution, the Committee recommends that this entire matter be referred to the Council of the California Medical Association and to the Board of Trustees of California Physicians' Service for appropriate investigation and solution. Mr. Chairman, I so move.

DR. SHEPARD: I second the motion.

SPEAKER GOIN: Is there any discussion?

DR. BRYANT R. SIMPSON (San Diego County): Members of the House of Delegates: We from San Diego wish to put ourselves straight with this House. We have brought to you a problem which has grown to a place that it needs attention. . . .

DR. EDWARD A. BLONDIN (San Diego): I want to tell you fellows something that amuses me a great deal. Yesterday when the San Diego delegation appeared and read our resolution we did not know your reaction. Before we came here we appeared before the members of the Council and the Trustees of the C.P.S. We talked frankly. . . .

SPEAKER GOIN: Is there any further discussion? Doctor Powell.

DR. DEWEY R. POWELL (Stockton): Mr. Speaker and Gentlemen of the House: I am in a peculiar position which has permitted me to be rather close to this whole picture, inasmuch as I am a member of the Council, being a Councilor, and, likewise, am a member of the Board of Trustees of C.P.S. . . .

It is impossible and impractical to review all of the many phases of this immense problem in detail, but I can assure you that if it is referred, as advised by the Committee, to the Council of the California Medical Association, it will receive every consideration, and in calm, cool deliberations the necessary steps will be ironed out so far as possible. We will try to iron out the irritating details in the administration and the oversights, to the end that we may cooperate with and not fight our government. (Applause.)

DR. EUGENE F. HOFFMAN (Los Angeles): Mr. Speaker and Members of the House of Delegates: There are two ways to discuss a problem. One is from the personal standpoint and the other is from the factual standpoint. We can always deal with generalities. I wish to use the first two methods. . . .

Thank you, Mr. Speaker, for your courtesy. (Applause.)

SPEAKER GOIN: Is there any further discussion? Does anyone else wish the floor?

DR. KARL L. SCHAUPP: Mr. Speaker and Members of the House of Delegates: With Henry Rogers and Philip Gilman I went yesterday morning to the conference with the boys from San Diego to discuss this problem. . . .

Our duty, first, is to our armed services and our next duty is to see that our men producing the goods get proper attention. Next comes our own folks at home, and if we do not cooperate with the government when we have the opportunity now, then we have no excuse if the government steps in. You know how I, this morning, stressed that the government is stepping in right and left. They have done things we never thought possible. We have heard about these agricultural workers coming out from Oklahoma, the East and the Middlewest. They will have to be taken care of. One of the Federal agencies has set up \$20,000,000.00 for medical and hospital care of the migrant Mexican worker by paid physicians; where the workers are living in these units and where the areas are too small, the government is going to have this work done by contract.

It is a constant threat. I do not think the Public Health Service wants to come in. We have our chance, gentlemen. Think it over! We know this is important. I know that the men to whom I have talked from San Diego think it is important but their problem is only one. We are a big family. Some of our children are at the front and some of us cannot go, but let us look at the whole picture. It will help to cure the problem and situation throughout the State. Thank you. (Applause.)

DR. W. DON ROLPH (San Diego): Mr. Speaker and Members of the House of Delegates: I have listened intently to what Dr. Schaupp had to say, as well as others who have spoken on this subject. I think we are all in accord with Dr. Schaupp's statement that we are interested primarily in taking care of the people who are doing war work and thus do our part.

DR. NEWELL JONES (Los Angeles): . . . There are some things I am still confused about. I do not know what this is all exactly about. . . .

SPEAKER GOIN: Is there any further discussion? Is the question called for? The question is on the Com-

mittee's motion to commit this matter to the Council for consideration and action. Are you ready for the question?

DR. BLONDIN: I would like the privilege of answering or opposing some of this discussion. . . .

DR. E. T. REMMEN (Los Angeles): After conference with some of the San Diego delegation it appears that, perhaps, the matter can be settled rather readily by amending the motion to refer the matter to the Council and adding thereto certain desires or wishes of the House of Delegates setting forth certain principles to guide the Council in dealing with this very vexatious problem. . . .

Mr. Chairman, I move those recommendations as an amendment to the resolution.

SPEAKER GOIN: Do I hear a second?

DR. WALTON (San Diego): I second the motion.

SPEAKER GOIN: The question is on the adoption of the amendment.

DR. MADSEN: I am reminded today of a couple of days some 10 or 12 years ago when we were held spell-bound by a Patrick Henry who waved large volumes of books before us, and who opened the subject of compulsory health service in the State of California. In fact, I lost myself a moment ago and thought I was there again. . . .

When the resolution was offered yesterday, I certainly hung my head, but could hear in it the possibility for compromise on these two points, as Dr. Remmen has mentioned, and as covered in his motion to amend. I think there the crux of the situation hangs. . . .

I think that most of us are far-seeing, and while our steps have been sometimes crooked, and while we have tread on toes, and I will say that to the San Diego delegation, I feel we are in the right direction, so please let's not bury our heads and run at a time when we need a bargaining agent to face big national issues. (Applause.)

DR. AYRES: Mr. Chairman and Members of the House: I would like to say a word on this proposed amendment. I appreciate the sincerity of the efforts to compromise; on the other hand, there is a tremendous problem involved in the administrative procedure. When one speaks of dealing directly with the patients in the matter of membership, therein may lie problems which have not been fully considered. I do not know what the difficulties that may be encountered in that procedure may be. . . .

I would, therefore, urge that if any amendments are to be tacked on to the motion that they be seriously considered. Personally, I would favor the passage of the recommendation of the Resolutions Committee as it was read.

SPEAKER GOIN: Is there any further discussion?

DR. H. RANDALL MADELEY (Solano County): . . . I must say this discussion has been very enlightening. . . .

I would like from my own personal experiences to offer some suggestions to this body, whatever the final analysis of this matter may be. . . .

The question was called for.

SPEAKER GOIN: The question is on the adoption of the amendment. Are you ready for the question?

A vote was taken on the amendment.

SPEAKER GOIN: The Chair is in doubt. We will take a rising vote.

A rising vote was taken on the adoption of the amendment, with 46 "ayes" and 51 "noes."

SPEAKER GOIN: The amendment is lost.

DR. MOLONY: I move the previous question.

SPEAKER GOIN: The question is on the adoption of the Committee's report which is to refer this matter to the Council. Are you ready for the question?

The motion was put to a vote and it was unanimously carried.

SPEAKER GOIN: This section of the report is adopted. Dr. Ayres.

DR. AYRES: Mr. Chairman, that completes the report of Reference Committee Number 3. I move that the report be adopted as read and amended.

DR. MADSEN: I second the motion.

The motion was put to a vote and it was unanimously carried.

SPEAKER GOIN: It is carried and the report is adopted.

The personnel of Reference Committee Number 3 has been Dr. John Hunt Shephard of San Jose, Dr. Thomas A. Card of Riverside, and Dr. Samuel Ayres, Jr., of Los Angeles. For three or four months every year I feel like pinning medals on members of Committee No. 3. I am sure you feel as I do—that they have done a grand job. I am sure you join me in thanking them for the work they have done for us today.

* * *

I think that the House might like to know that in spite of the streamlining of our sessions, we have had 1,184 registrants; 174 for the Woman's Auxiliary and 933 attending the President's dinner last night.

Mr. Secretary: Under Unfinished Business, is there anything to bring before the House?

SECRETARY KRESS: There is no unfinished business on the table.

* * *

Reference Number 50:

Presentation of Officers:

SPEAKER GOIN: The next is the Presentation of Officers.

Vice-Speaker—Dr. Alesen, will you come forward please. Dr. Lewis A. Alesen of Los Angeles has been elected as your *Vice-Speaker*. Dr. Alesen of Los Angeles. (Applause.)

SPEAKER: I now have the pleasure of presenting to the House, Dr. E. Vincent Askey of Los Angeles as your *Speaker*. (Applause.)

Dr. Askey took the Chair.

SPEAKER ASKEY: Ladies and Gentlemen of the House: I do not need to tell you how much I appreciate the honor that you have conferred upon me. I know it is a tough job to follow a man like Lowell Goin. I am going to ask that you people have a little bit of confidence in me, and give me a little bit of help at this time, because I am going to need all of the help that I can get.

I take great pleasure as your Speaker in presenting to you your *new President-Elect*, Dr. Lowell Goin. (Applause.)

DR. GOIN: Mr. Speaker and Members of the House of the California Medical Association: California Medicine has no higher honor to offer to one of its members than the elevation to this office. I just simply want to indicate to you that I am indeed grateful for the honor—I am not only deeply grateful, but I am deeply honored.

Sincerely, I do promise you that whatever small talents I may have, I shall do the best I can during my tenure of office. I also want to say that I have been your Speaker for six years, and I have enjoyed every minute of it. I deeply appreciate the courtesy, the cooperation, and the forbearance of this House. I thank you all for it, and it was with a great deal of reluctance that I turned the gavel over to Dr. Askey. Thank you.

SPEAKER ASKEY: It is now my great pleasure to present to you our *new President*, Dr. Karl L. Schaupp. (Rising Applause.)

PRESIDENT SCHAUPP: There is something I would like to say to Lowell Goin that I could not have said five minutes ago. Five minutes ago I felt entirely different than I do now. I was President-Elect last year and had something to look forward to this year; but, in being inducted as President of this organization, there is a satisfaction, there is a feeling of great responsibility. None of us know what is ahead for this year, but we do know that there is going to be lots and lots of trouble; and some of it is going to be solved by the things that have happened here this afternoon. There is going to be a greater strength in this organization, not because I am President, but because this organization is more closely knit. This Council that we have had for the past few years is so strong and so sincere that I am sure that their vision in this direction will help carry out the functions of the Presidency, which without their help cannot be done.

Thank you. (Applause.)

SPEAKER ASKEY: We have now the duty of presenting to you, for his last official act, the immediate Past President of this Association, a duty which our immediate Past President, Dr. Henry Rogers, will now perform. Dr. Henry Rogers, immediate Past President of this Association. (Applause.)

DR. HENRY ROGERS: Dr. William Molony, for years past, for your very valuable service to this organization, the California Medical Association wishes to present to you a plaque on which is inscribed: "*The California Medical Association presents to William R. Molony, M.D., this token of appreciation for his services as President for 1943.*"

I do not think any of you have seen it, but it is a beautiful plaque.

Dr. Molony was then presented with the plaque.

DR. MOLONY: Dr. Rogers and Fellow Members of the California Medical Association: I am deeply appreciative of this token. I accept it with all the fervor and the graciousness and kindness which has been given me. Let me say to you this; that, as times goes on, and during this year my part of the organization will be to be known as the Past President. As such I shall have a seat on the Council and upon the Executive Committee. I will do my best to carry on for the good of the organization, and give to it what I have by way of experience and what talents I have left. And when that year is ended, if I am still with you, I shall still give to the organization all the same effort and endeavors I have tried to give in the past. Thank you very much. (Applause.)

* * *

DR. GOIN: The Council will convene at this table immediately following adjournment of this House. The custom of the House has been at this time to appoint the Chairman of the Council, the President and Association Secretary a committee to edit and approve the Minutes of the House. The Chair will entertain such a motion.

DR. BRUCK: I so move.

DR. MADSEN: Second the motion.

The motion was put to a vote and it was unanimously carried.

SPEAKER GOIN: It is carried and so ordered. Is there any further business to come before this House?

DR. MOODY: I believe that we should retire from Executive Session into the House of Delegates.

DR. GOIN: I believe we can transact all our remaining business in Executive Session, but if you wish we will retire from Executive Session.

DR. MOODY: I so move.

DR. AYRES: Second the motion.

DR. GOIN: It has been moved and seconded that we retire from Executive Session. Are you ready for the question?

The motion was put to a vote and it was unanimously carried.

DR. GOIN: The House has now retired from Executive Session. Is there any further business to come before this House? If not, the Chair will entertain a motion for adjournment.

Adjournment:

DR. AYRES: I move we adjourn.

DR. MOODY: Second the motion.

The motion was put to a vote and it was unanimously carried.

DR. GOIN: The motion is carried and the House stands adjourned.

The House of Delegates adjourned at 5:30 P.M., Monday, May 3, 1943.

LOWELL S. GOIN,
Speaker of the House of Delegates.

GEORGE H. KRESS,
Secretary of the House of Delegates.

COUNCIL OF THE CALIFORNIA MEDICAL ASSOCIATION: MINUTES

Minutes of the Three Hundred Seventh (307th) Meeting of the Council of the California Medical Association*

The meeting was called to order in Conference Room No. 9 of the Hotel Biltmore in Los Angeles, at 10:30 A.M., on Saturday, May 1st, 1943.

1. Roll Call:

Present: Philip K. Gilman, William R. Molony, Sr., Karl L. Schaupp, Henry S. Rogers, Lowell S. Goin, E. Earl Moody, Edwin L. Bruck, Dewey R. Powell, Sam J. McClendon, Edward B. Dewey, Calvert L. Emmons, Donald Cass, Harry E. Henderson, Axcel E. Anderson, R. Stanley Kneeshaw, John W. Cline, Frank A. MacDonald, John W. Green, and Secretary George H. Kress.

Present by Invitation: E. Vincent Askey, Vice-Speaker; Dwight H. Murray, Chairman Committee on Public Policy and Legislation; Mr. John Hunton, Executive Secretary; Mr. Hartley F. Peart, Legal Counsel, and Mr. Howard Hassard, Associate; A. E. Larsen, Medical Director of California Physicians' Service; Eugene F. Hoffman, M.D., and Mr. Bryan Kelly, of California Physicians' Service.

2. Minutes:

Minutes of the following meetings of the Council and the Executive Committee were submitted and approved:

(a) Minutes of the 306th meeting of the Council, held on February 28, 1943, at Los Angeles. (Abstract was printed in C. & W. M., April, 1943, pages 237-240.)

(b) Minutes of the 180th meeting of the Executive Committee, held on February 7, 1943, at San Francisco.

* Reports referred to in minutes are on file in the headquarters office of the Association. Minutes as here printed have been abstracted.

(Abstract was printed in C. & W. M., March, 1943, pages 129-141.)

3. Membership:

(a) A report of membership was submitted and placed on file. Total number of active members whose dues for 1943 have been paid through component county societies is 6,869, but this includes a total of 1,867 members who have been reported as being in military service. Total new members included in above is 171.

(b) Upon motion duly made and seconded, it was voted that 1,542 members whose dues have been paid since April 1, 1943, be reinstated.

(c) Upon motion duly made and seconded, Retired Membership was granted to the following members whose applications had been received in duly accredited form from their respective component county societies:

Thomas C. McCleave, Alameda County.

James Johnston, Los Angeles County.

Alice Barker-Ellsworth, Los Angeles County.

Caesar George Cahen, Los Angeles County.

A. L. Houseworth, Los Angeles County.

Francis J. Pursell, Los Angeles County.

William F. Reasner, Los Angeles County.

Lillian Ray Titcomb, Los Angeles County.

Homer S. Wilson, Los Angeles County.

Rachel L. Ash, San Francisco County.

(d) Upon motion duly made and seconded, Life Membership was granted, under Provision 4 of Article IV, Section 1(e) of the Constitution, to:

Mathew D. Pratt, Shasta County.

4. Financial:

(a) Executive Secretary Hunton submitted reports on finances. Same were received and placed on file.

(b) Upon motion duly made and seconded, it was voted that no dues be collected from members in active military service.

(c) Upon motion duly made and seconded, it was voted that no pro-rata refunds of dues be made to members who may enter military service after having paid dues for a current calendar year.

5. Death of Councilor Frank R. Makinson:

The President and Secretary were instructed to draw up suitable resolutions concerning the death of Councilor Frank R. Makinson, copy to be sent to the family, and printed in CALIFORNIA AND WESTERN MEDICINE.

Upon the suggestion of Dwight H. Murray, the Secretary was instructed to write a letter of appreciation on behalf of the Council, to Assemblyman Johnson who sponsored the resolution of the California State Assembly concerning Dr. Makinson.

6. California Physicians' Service:

Discussion took place concerning the medical and hospitalization services rendered by California Physicians' Service and the Blue Cross Hospitalization groups now operating in California (Hospital Service of California, San Francisco; Associated Hospital Service of Southern California, Los Angeles; Intercoast Hospitalization Insurance Association, Sacramento).

Medical service as conducted by California Physicians' Service was then considered. Explanatory comments were made by Dr. Larsen concerning the status of the following C.P.S. contracts: (1) Full Coverage; (2) Surgical; (3) Two-Visit Deductible; (4) Rural; (5) War Housing Projects.

A summary of the above activities, as revealed in the annual report of California Physicians' Service, as of March 3, 1943, was given, it being stated that the number of professional members (physicians) on date of March 31, 1943, was 5,200; and the number of beneficiary

members 88,609, these being divided into sub-groups as follows:

Full Coverage	4,000
Two-Visit Deductible	38,609
Rural	5,000
Housing Projects	41,000

Monthly income of C.P.S. on March 31, 1943, was \$92,898.70, and the administrative expense on the same date, \$17,928.07 (19.0 per cent).

In the general discussion which followed, Councilor John W. Green read replies that had been received by him in answer to a questionnaire he had forwarded to members of his district who were residing in the Vallejo area. Dr. Larsen also commented on the conditions which had arisen in the Vallejo district.

Dr. McClendon called the attention of the Council to a proposed resolution which would probably be submitted to the C.M.A. House of Delegates by members of the San Diego County Medical Society who felt that conditions had arisen in San Diego County that were not conducive to harmony between physicians in private practice and California Physicians' Service. It was stated that the Linda Vista project had been given approval as a filtering center, and that as regards other housing projects in San Diego County, the Council of the San Diego County Medical Society was to be consulted before work could be undertaken by California Physicians' Service, but that C.P.S. had failed to observe this agreement.

The medical service difficulties which could rapidly come into being in communities of a mushroom type that are associated with wartime industries, were pointed out. Also, the inability to secure the services of near-by physicians who were in civilian practice, but who, overburdened with their own work, had practically no time for professional work that might greatly interfere with private practice.

Dr. McClendon stated that the reaction in the San Diego County Medical Society had led to the suggestion that the San Diego County Medical Society might request the California Physicians' Service to withdraw its medical service in housing projects of San Diego County.

Dr. Hoffman, of C.P.S., spoke of the large number of night calls in some of these projects, and the inability to secure physicians in private practice to accept such work.

Councilor MacDonald brought up the matter of the actuarial report that had been submitted by Mr. Ralph Nelson. Councilor MacDonald stated that the Council, more than a year ago, had requested a detailed actuarial report, and that the report which had been submitted did not fulfill the requirements outlined in the original request. Mr. Kelly, of C.P.S., stated that Mr. Nelson's report to the Trustees of C.P.S. was limited in detailed actuarial information because sufficient time had not elapsed since the change from full coverage to warrant explicit and detailed figures. Nor, he stated, could such information be secured from any other medical service plan operating in America.

Chairman Gilman spoke of a recent conference with Mr. John R. Mannix, who was to appear on the program on Sunday for a general discussion of medical service and hospitalization plans, but without any reference to California conditions.

7. Procurement and Assignment Service:

Procurement and Assignment Service was discussed, and it was suggested that in areas within the State where the quotas were not being filled, it might be well for the county societies concerned to appoint committees of senior members to aid in the work of the Procurement and Assignment Service.

8. California and Western Medicine:

Discussion was had concerning CALIFORNIA AND WESTERN MEDICINE with special relation to its typographical appearance and costs. After full discussion, on motion duly made and seconded, it was voted that arrangements be made to again place the printing of CALIFORNIA AND WESTERN MEDICINE with the former printer, the James H. Barry Company of San Francisco.

9. Study Group on Post War Planning:

Dr. Askey reported on a Los Angeles organization, "Study Group on Post War Planning," and asked advice concerning policy regarding coöperation therewith.

Upon motion made and seconded, it was voted to be the sense of the Council that Dr. Askey, as President of the Los Angeles County Medical Association, be advised that a member of the medical profession should continue as a member of the "Study Group on Post War Planning."

10. Retired Membership:

Association Secretary Kress called attention to the desirability of an amendment to the C.M.A. constitution concerning retired membership, whereby the Council would be empowered to consider recommendations received from county medical societies within twelve months after the termination of active membership. It was agreed that Secretary Kress and the Legal Counsel should prepare such an amendment for submittal to the House of Delegates.

11. Legislation:

The Chairman of the Committee on Public Policy and Legislation commented on the various public health and medical measures which had been submitted to the 55th California Legislature, in session at Sacramento, stating that none of the proposed laws, inimical to the best interests of the public health and medical standards, had much chance of enactment.

12. Legal Department:

Mr. Peart reported on the present status of the application recently made by the Association to the California Industrial Accident Commission for a revised and increased fee schedule in compensation cases. He reported that the Commission has had the application of the Association under consideration for about two months, and he read to the Council a letter recently received from the Secretary of the Commission in which it was stated that the proposed increase in medical fees will be held under advisement at least until the adjournment of the Legislature. Mr. Peart stated that in presenting the Association's application and in representing the Association before the Commission, he had been received with every courtesy and attention.

In the discussion that followed, upon motion made and seconded, it was voted that a resolution be submitted by the Council to the House of Delegates reiterating the position of the Association on the fee schedule and expressing the policy of the Association with reference to rebating and fee cutting. The Chairman appointed Dr. Donald Cass and General Counsel Peart a committee of two to draft such resolution.

13. Adjournment:

Upon motion duly made and seconded, it was voted that the next meeting would be held on Sunday morning, May 2nd, at 7:30 A.M. Adjournment, in respect to the memory of the late Frank R. Makinson, Councilor of the Seventh District, followed.

PHILIP K. GILMAN, *Chairman*
GEORGE H. KRESS, *Secretary*.

Minutes of the Three Hundred Eighth (308th) Meeting of the Council of the California Medical Association

The meeting was called to order in the Breakfast Room of the Hotel Biltmore, Los Angeles, at 7:30 A.M., on Sunday, May 2nd, 1943.

1. Roll Call:

Present: Philip K. Gilman, William R. Molony, Sr., Karl L. Schaupp, Henry S. Rogers, Lowell S. Goin, E. Earl Moody, Edwin L. Bruck, Dewey R. Powell, Sam J. McClendon, Edward B. Dewey, Calvert L. Emmons, Donald Cass, Harry E. Henderson, Axcel E. Anderson, R. Stanley Kneeshaw, John W. Cline, Frank A. MacDonald, John W. Green, and Association Secretary George H. Kress.

Present by Invitation: Mr. John Hunton, Executive Secretary; Mr. Hartley F. Peart, legal counsel; and Mr. Howard Hassard, associate; and Dwight H. Murray, Chairman Committee on Public Policy and Legislation.

2. California Physicians' Service:

Informal discussion took place on medical service and hospitalization problems. On motion by McClendon, seconded by Anderson, it was voted that a liaison committee of three be appointed to act on behalf of the California Medical Association with local committees of component county societies, and also with committees from California Physicians' Service and the Hospitalization Groups. It was suggested that the county societies might well give time at each meeting to a consideration of medical service problems.

3. Industrial Accident Commission Fee Table:

The committee consisting of Dr. Donald Cass and Mr. Peart submitted a draft of resolution on this subject to be presented to the House of Delegates. The proposed resolution as presented by the committee was approved.

4. Adjournment:

Upon motion duly made and seconded, it was voted that the meeting adjourn.

PHILIP K. GILMAN, *Chairman*.
GEORGE H. KRESS, *Secretary*.

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Minutes of the Three Hundred Ninth (309th) Meeting of the Council of the California Medical Association

The meeting was called to order in the Breakfast Room of the Hotel Biltmore, Los Angeles, at 7:30 A.M., on Monday, May 3d, 1943. Later recessed to Conference Room 9 for report by Mr. Mannix.

1. Roll Call:

Present: Philip K. Gilman, William R. Molony, Sr., Karl L. Schaupp, Henry S. Rogers, Lowell S. Goin, E. Earl Moody, Edwin L. Bruck, Dewey R. Powell, Sam J. McClendon, Edward B. Dewey, Calvert L. Emmons, Donald Cass, Harry E. Henderson, Axcel E. Anderson, R. Stanley Kneeshaw, John W. Cline, Frank A. MacDonald, John W. Green, and Association Secretary, George H. Kress.

Present by Invitation: Dwight H. Murray, Chairman Committee on Public Policy and Legislation; E. Vincent Askey, Vice-Speaker, Mr. John Hunton, Executive Secretary, Morton R. Gibbons, Sr., Mr. Hartley F. Peart, Legal Counsel, and Mr. Howard Hassard, Associate.

2. Farm Security Administration Health Program:

Doctor Schaupp called attention to congressional legislation concerned with the Farm Security Administration, and stated that if no appropriation is made by

Congress, the health work for itinerant agricultural workers might be seriously jeopardized. It was voted that the Council send letters to California Congressmen, urging them to support legislation that would provide appropriations for the work.

3. American Medical Association Meeting:

Motion was made and carried that C.M.A. Delegates to the A.M.A. be instructed to submit a resolution at the June 7th, 1943, meeting of the A.M.A. House of Delegates, requesting the American Medical Association, when it decides to hold annual meetings of the Scientific Assemblies, to follow the sequence of meeting places previously approved: namely, San Francisco, St. Louis, New York.

4. Committee on Nominations of Standing Committees:

Chairman Gilman appointed as a committee to submit a report with nominations of members of Standing and Special Committees, John W. Green, Henry S. Rogers, and Calvert L. Emmons.

5. Survey of Medical Service and Hospitalization Services:

Mr. John R. Mannix, of Michigan Medical Service, whose services had been secured by the Council to make a survey of medical service and hospitalization plans and groups now in operation in California, made a tentative report on his findings. Full discussion followed. The final report by Mr. Mannix will be rendered at an early date.

6. Adjournment:

Upon motion duly made and seconded, it was voted that the meeting adjourn.

PHILIP K. GILMAN, *Chairman*.
GEORGE H. KRESS, *Secretary*.

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Minutes of the Three Hundred Tenth (310th) Meeting of the Council of the California Medical Association

The meeting was called to order in the Music Room of the Hotel Biltmore, Los Angeles, on Monday afternoon, May 3d, 1943, subsequent to the adjournment of the House of Delegates.

1. Roll Call:

Present: Philip K. Gilman, Karl L. Schaupp, William R. Molony, Sr., Lowell S. Goin, E. Vincent Askey, E. Earl Moody, Edwin L. Bruck, Dewey R. Powell, Sam J. McClendon, Edward B. Dewey, Calvert L. Emmons, Donald Cass, Harry E. Henderson, Axcel E. Anderson, R. Stanley Kneeshaw, Lloyd E. Kindall, Frank A. MacDonald, John W. Green, and Secretary George H. Kress. Absent: John W. Cline.

2. Organization Meeting:

(a) Philip K. Gilman was nominated as Chairman and unanimously elected.

(b) John W. Cline was placed in nomination for the office of Vice-Chairman, and unanimously elected.

(c) The following appointments were made: George H. Kress to be Secretary-Treasurer and Editor; Hartley F. Peart to be Legal Counsel; and John Hunton to continue as Executive Secretary under a three year appointment made in 1942.

(d) Chairman Gilman announced as the Auditing Committee for the next fiscal year: John W. Cline, Chairman; Edwin L. Bruck; and Lloyd E. Kindall.

3. Vote of Thanks to Guest Speakers and Hotel Management:

The Secretary was instructed to extend thanks to the guest speakers and to the management of the Hotel

Biltmore for their coöperation in making the 72nd Annual Session a success.

4. Adjournment:

There being no further business, upon motion duly made and seconded, it was voted that the meeting adjourn.

PHILIP K. GILMAN, *Chairman*,
GEORGE H. KRESS, *Secretary*.

EXECUTIVE COMMITTEE OF THE CALIFORNIA MEDICAL ASSOCIATION

Abstract of Minutes: Executive Committee*

Minutes of the One Hundred Eighty-first (181st) Meeting of the Executive Committee of the California Medical Association

The one hundred and eighty-first (181st) meeting of the C.M.A. Executive Committee was called to order in the Music Room of the Hotel Biltmore, Los Angeles, on Monday, May 3, 1943, subsequent to adjournment of the meetings of the House of Delegates and Council.

1. Roll Call:

Present: President Karl L. Schaupp, President-Elect Lowell S. Goin, Speaker E. Vincent Askey, Council Chairman Philip K. Gilman, Past-President William R. Molony, Sr., and Secretary-Treasurer George H. Kress.

Absent: John W. Cline, Chairman of the Auditing Committee.

2. Election of Chairman:

The Secretary stated this was the organization meeting of the Executive Committee. Upon motion duly made and seconded, it was voted that John W. Cline of San Francisco be elected Chairman.

3. Adjournment:

There being no other business, the meeting adjourned.

GEORGE H. KRESS, *Secretary*.

Medical Journals—For Colleagues in Military Service:

In former issues editorial comment was made on a plan to forward medical journals to the Hospital Stations of Army, Navy and Air Force camps now located in California.

This work is being carried on by the California Medical Association—through its Committee on Post-graduate Activities—in coöperation with the medical libraries of the University of California, Stanford, and the Los Angeles County Medical Association.

The addresses of the three libraries follow:

U. C. Medical Library, The Medical Center, 3rd and Parnassus, San Francisco, California.

Lane Medical Library, Clay and Webster Streets, San Francisco, California.

Los Angeles County Medical Library Association, 634 South Westlake, Los Angeles, California.

If more convenient, you can send journals, via "Railway Express Agency," collect, to: C.M.A. Post-graduate Committee, Room 2008, Four Fifty Sutter, San Francisco, California. Railway Express Agency addresses: In San Francisco, at 635 Folsom (EX 3100); in Los Angeles, at 357 Aliso (MU 0261).

* Full minutes of the Executive Committee meeting have been mailed to all councilors, and copies are also available for inspection in the central office of the Association.

CALIFORNIA COMMITTEE ON PARTICIPATION OF THE MEDICAL PROFESSION IN THE WAR EFFORT†

War Casualties

U. S. Has Lost 80,000 Men in Battle Action

The Armed Forces of the United States have lost more than 80,000 men in battle casualties in 17 months of war.

This total will be increased, probably by about 5,000, officers said today, as reports not yet compiled for the last four weeks of the Tunisian Campaign add to the Army's lists of killed, wounded and missing.

Since the war began, the Navy has reported 23,955 casualties in the Navy, Marine Corps and Coast Guard; 7,218 killed, 4,683 wounded and 12,054 missing.

Army casualties reported through May 7 total 56,942—6,076 killed, 12,277 wounded, 24,345 missing, 14,254 reported prisoners. Of the wounded, 4,000 have returned to duty or recovered sufficiently to be discharged from hospitals.

These Army totals included two lists made public today, containing the names of more than 1,000 soldiers wounded in the European, North African, Middle Eastern, Pacific and Southwest Pacific theaters. Approximately 900 of these were in North Africa.

Of the Army's total of 14,244 prisoners and 24,345 missing, all but a small number were lost in the Philippines. More than 3,000 have been reported missing in North Africa, and most of these are presumably prisoners in Italy or Germany.

A total of 4,555 merchant marine casualties since September, 1941, was reported yesterday by the Navy.—*San Francisco Chronicle*, May 18.

Medics at Front in Africa Are Real Heroes

Northern Tunisia (By Wireless).—I hope somebody in this war writes a book about the medics at the front. I don't mean the hospitals so much as the units that are actually attached to troops and work on the battlefields under fire.

They are a noble breed. . . .

In the last war nerve cases were called "shell shock." In this war they're called "anxiety neurosis." About 50 per cent of our neurosis patients are recoverable and even return to fighting units.

A large proportion of these cases are brought about

† Harold A. Fletcher, M. D., 490 Post Street, San Francisco, is the State chairman on Procurement and Assignment Service, with supervision of all counties north of the fourteen southern counties.

Associate California chairman for the fourteen southern counties is Edward M. Pallette, M. D., 1930 Wilshire Boulevard, Los Angeles.

Doctors desiring to go into the Army may have their papers prepared and receive orders for physical examination from the Officer Procurement Service, 328 Flood Building, San Francisco, in charge.

From any of the fourteen southern counties, they may apply to the Officer Procurement Service, 1418 U. S. Post Office and Courthouse Building, Los Angeles, Major M. L. Murrell, in charge. Telephone: MADison 7411, Extension 684.

The Office of Naval Officer Procurement for the northern section of California is in charge of Capt. C. L. Arnold, U.S.N. The Senior Medical Officer is Capt. Philip K. Gilman, U.S.N.R. The office is located at Room 515, 703 Market Street, San Francisco. Telephone: EXbrook 3386, Local 46.

The Naval Office of Procurement for the southern section of California is in charge of Admiral A. Johnson, U.S.N. The Senior Medical Officer is Captain John C. Ruddock, U.S.N.R. The office is located at 411 West Fifth Street, N.W. Corner of Hill, Los Angeles. Telephone: MICHigan 8641.

by complete fatigue, by fighting day and night on end with little sleep and little to eat.

Surgeons sometimes spot neurosis cases that they suspect of being faked in order to get out of the front lines. Their system is to put these men on stretcher-bearer duty—a hard, thankless, dangerous task. If they are faking they get well quickly and ask to be returned to their regular outfits.

In the front lines you get so used to the constant boom of artillery that you stop jumping every time a big gun goes off. If you didn't you'd look like somebody with St. Vitus' Dance. However, there's another reaction—you get irritated. You get irritated in the same way you lose patience with a baby that cries all day or a dog that barks all night. The damn noise just never ends. There's hardly a second of the day when the guns aren't rolling or those ghostly shells rustling through the air.

Finally you get so bored with its consistency that you feel like jumping up in a huff and yelling:

"Oh, for God's sake, stop it!"—Ernie Pyle in *San Francisco News*, May 17.

Here Are Things That Crack Men's Minds in This War

Aboard a U. S. Hospital Ship.—(AP.)—May 23.—Shower baths and ice cream proved effective initial treatment for the first large group of American mental breakdown casualties in this war, men who cracked under heavy and steady bombardment and shelling in the Guadalcanal jungle campaign.

With baths, ice cream, rest, quiet and good food, most victims of what navy psychiatrists now term combat fatigue responded with encouraging speed, Lieutenant Commander Dana L. Farnsworth of Williamstown, Mass., said today.

In general, Dr. Farnsworth observed, high hopes were justified for the eventual full recovery and restoration to normal life of many of the Guadalcanal victims of so-called war neurosis.

As psychiatrist aboard a hospital ship, Dr. Farnsworth diagnosed and directed the first treatment for many such casualties of the Solomons action from last August until February 1. He reported his findings in a study of these cases to a conference of navy medical officers stationed in the South Pacific.

Chief among his conclusions were:

Regardless of how strong, tough and brave a man may be, in modern war eventually he will break down if subjected to "more strain than the human organism can stand, no matter how well equipped."

Shelling by enemy surface ships—a dreadful, concentrated, earthshaking barrage of heavy Navy guns was more morale shattering among our forces than aerial bombardment.

In comment on Dr. Farnsworth's report, Lieutenant Commander C. Nelson Davis of Philadelphia, advanced a theory that combat fatigue casualties among American forces might be fewer if homes and cities in the United States were under fire.

"The American fighting man can always dream of peace at home," Dr. Davis remarked. "Perhaps a lot of our boys would not break down if they did not have this escape."

In World War I the condition of combat fatigue was called shell shock. The term war neurosis later was adopted and this in turn is being replaced by the diagnosis combat fatigue.

Fundamentally, the cause of this type of breakdown is

conflict in the mind. The instinctive reaction to heavy and dangerous bombardment is to run, to get away to safety. By training and principle, a fighting Marine or Navy man sticks to his post or station. He doesn't want to be a coward.

Farnsworth cited these conditions and experiences as assaulting the minds and nervous systems of men in the front lines:

Lack of sleep. Constant tension. Repeated air raids plus false alert alarms of "condition red." Poor food. Rumors that lift or depress hopes. Flares, searchlights. Seeing friends killed or wounded. Fear of death. Blasting noise. Going into the jungle to find and burn American dead.

Dr. Farnsworth declared the "precipitating factor" in 85 per cent of the breakdown cases was a "near bomb or shell explosion." In the remaining 15 per cent no such specific factor was apparent, but the men were worn out, sleepless and physically exhausted.

He reported as one example a young marine who was thrown 10 feet by a bomb explosion. The bomb blast wounded five of eight men in his squad. Thereafter the young marine would begin shouting at any noise.

When he reached the hospital ship the young marine looked and acted like a "very old man," a typical behavior among the cases Dr. Farnsworth observed. "He was suspicious, almost animal-like," the doctor related.

He beseeched Dr. Farnsworth, "You're not going to send me back into that green hell, are you?"

This marine and all other like casualties were assured right away that they would not be sent back into action until they had recovered. All were told also that they would recover.

Dr. Farnsworth said each man was given a complete physical examination. "They felt better when they were assured there was nothing physically wrong with them."

The usual attitude of officers and men toward mental breakdown cases, Dr. Farnsworth observed, is "here is a weak sister." In consequence, a sense of shame was apparent in nearly all the cases, ranging from high ranking officers to ordinary marine privates.

"Some said they wanted to go back," Dr. Farnsworth declared, "but many wanted to be told they didn't have to go back."

Extreme sensitivity to noise was demonstrated by 97 of 100 patients selected by Dr. Farnsworth for recorded study. Seventy-two experienced difficulty in sleeping. Fifty-five were subject to horrible dreams in which they relived their battle experiences.

Answering a question, Dr. Farnsworth said he had made no record on whether a majority of the breakdown cases were city or farm boys.

"I have the distinct impression, though, that most were typical small town boys, from towns of 4,000 to 50,000," he said.—*San Francisco Chronicle*, May 24.

The First Western Meeting of U. S., State Defense Aids

Job Too Big to Be Handled by Federal Organization, Says OCD Official

Yesterday's meeting of representatives of civilian protective services of the eight Western States was the first of its kind between State and Federal defense officers.

It was keynoted by Kenneth R. Hammaker, assistant director in charge of Civilian Protection, OCD, as "a realistic grassroots session" to acquaint state defense organizations with their responsibility.

"The job is too big to be handled by the Federal organization; all we can do is pass along the latest suggestions based upon overseas experience, and the States

must do the work," he declared. He asked the delegates to let down their hair.

This they proceeded to do with such gusto that he later cautioned against too much impatience in not having all the answers supplied.

H. P. Everest, assistant sector chief at Seattle, OCD, said his office served "as a bulwark between the mistakes of Washington, D. C., and local civilian defense councils. Every parachute jumper from Washington has told us that the sector office is impractical, unsound, and that's proof that Washington, D. C., doesn't know local conditions.

"Washington had a 'share-the-meat' program. We called it 'share-what-meat?' program. There wasn't any. It was silly. We need more autonomy for the sector offices," he asserted.

Fred Confer, head of the regional planning committee, submitted maps showing the location of vital installations, a majority of them within 20 miles of the seacoast.

"We recognize that the enemy is intelligent; that he will undoubtedly seek to cripple production," he said, warning that the front lines lay in the principal cities.

He revealed that no over-all planning for reconstruction of installations on a dispersal basis in event of disaster was available, but asserted that the planning map work offered the groundwork of a master plan for avoiding future concentrations. He said some of the most inflammable types of construction were adjacent to the biggest war industries "in the path of probable attack."

Major Charles Shepard, assistant OCD medical director, reported 35,000 units of blood plasma had been distributed throughout the region chiefly to hospitals in big cities and medical men in smaller communities, all subject to transfer where needed most.

He said the Civilian Air Patrol and Army air forces had arranged to transport the plasma from one city to another when needed.

"If we have enemy action, someone is going to get hurt, and we will need hospitals. Unfortunately, surveys show our hospital facilities are more than filled on the Coast.

"We have arranged for 12,000 beds in interior hospitals that can be made available immediately."

He said that experience abroad had indicated that rescue squads to remove entrapped persons from bombed buildings were most important, and that such squads would be organized in teams of 10 men under civilian auspices with the return of a representative studying latest methods of operation.

He said recently a school for medical instructors in treatment of gas injuries had been launched and that these in turn would teach the volunteer staffs.

He paid tribute to medical men, many of them elderly, who were working as civilian volunteers in addition to serving their greatly increased practices.

George L. Levison, deputy OCD director for the Ninth region, said the main problem of civilian defense was to sustain morale and enthusiasm, and that "we are not out of the woods until the war is won." He quoted a telegram from Federal Chief James M. Landis, which advised the delegates:

"We have progressed far enough to realize that problems in this field tend not to be confined within any particular political boundary, far enough to learn how to work together, and from the Federal side, far enough to realize how great an initiative as well as a responsibility must be assumed by the States."—San Francisco *Chronicle*, May 28.

PRO PATRIA

Note. The Editor will be pleased to receive letters from C.M.A. members, who in turn have heard from colleagues in military service. (The original letters will be returned after "copy" has been set in print.)

Members of the Association, who are in service with the Armed Forces in the United States or elsewhere, are also invited to write the Editor concerning their experiences. Colleagues in civilian practice will be happy to hear from them.—Ed.

(COPY)

From Mat Hosmer, MC

U. S. Navy Pre-Flight School
Athens, Ga.

May 9, 1943.

Dear George:

I just received my membership card in the C.M.A. via 384 Post. It brought to my mind the fact that I owed you a letter on the state of things here in the south. Tomorrow starts my second year on this station. I can hardly realize it as the time has gone so fast. A lot of the men are getting orders to other stations, many sea duty and outside the U. S., but so far there haven't been any for me. A year is a long time to be on one spot though so I am expecting a move most any time.

Things have been going along at about the same old rate. We are still turning out aviators at a good rate (exact number, of course, is a military secret) and I am sure we are going to hear a lot of good things from them in the near future as they are a fine bunch of boys. My fee for medical services on these boys is to be paid in Jap heads. The exact number of course depends upon the services rendered. I expect to have quite a collection in a few months.

YOUR JOURNAL comes in each month and I get a big kick out of the news from the west coast. I'm about the oldest wild westerner on the station, most of the men are from the south or from Texas, so needless to say they won't listen to any stories of the west. They all think this is God's country but I know otherwise.

Give my best to the fellows around the Family.

Sincerely,
LT. COM. MAT HOSMER (MC).

(COPY)

From R. S. Peers, M.C.

155th Station Hospital, A.P.O. 923
Postmaster, San Francisco

May 10, 1943.

Dear Dr. Kress:

Many thanks for my membership card which reached me two days ago. You might note my new address where I am on D.S. for indefinite period.

I have a large medical ward with an equal large turnover, finding the work interesting as well as plentiful. Major Perez from U.C. is Chief of Surgery here with Captain Kaiser, formerly of Alameda County, his assistant. I have met many West Coasters out here.

Thank you again and hello to everyone.

Sincerely,
ROBERT S. PEERS, CAPT., M.C.

(Note. Dr. R. S. Peers is the son of Dr. Robert A. Peers of Colfax, former president of the California Medical Association.)

Military Clippings.—Some news items of a military nature from the daily press follow:

Army Hospital at San Pedro, in Los Angeles County

Federal officials in Los Angeles announced today that the War Department will construct an Army hospital costing in excess of \$1,000,000 in county territory adjoining San Pedro. The site comprises 77 acres. Construction will start immediately, Federal officials said, and Federal Judge Ben Harrison has issued an order granting the government immediate possession of the property.—*Alhambra Post-Advocate*, April 23.

Army Hospital at Spadra, near Pomona

An army medical unit under command of Colonel Lyle S. Powell has arrived here and is to be stationed at the government general hospital on the site of the former State Narcotic hospital, near Pomona, it was revealed today as work on the hospital progressed. . . .

Colonel Powell was enthusiastic about the hospital site, declaring it highly desirable both from the standpoint of patients who will be housed there and the unit. He was gratified over the welcome he and officers of his staff have received in Pomona.

The buildings that were a part of the State institution are being utilized, thus reducing by about one-third the estimated cost of the project as a whole, which includes much new construction. The hospital, in addition to a limited number of large central buildings, will consist of a series of barracks. . . .

The State property, near Pomona, was leased to the army shortly after Pearl Harbor. A medical unit was stationed there for several months, after which another important army unit utilized the property.

The site consists of approximately 500 acres secluded by rolling hills and is from every standpoint said by surgeons and engineers to be one of the most ideal hospital sites that could be found. A large section of the acreage is being used for the buildings.—*Pomona Progress-Bulletin*, May 8.

Sacramento to Form an "Affiliated Hospital Unit"

James M. Landis, director of the Federal Office of Civilian Defense, on May 10th, announced Sacramento County Hospital officials have been asked to prepare to assist the army temporarily in the event it is unable to take care of a sudden influx of war casualties or some other extraordinary military necessity.

Landis said groups of physicians are being organized for this purpose throughout the country to serve the double purpose of relieving the army of the necessity for organizing its own special groups of physicians for local emergencies and of helping to conserve the dwindling supply of physicians for the civilian population.

The groups, known as "OCD Affiliated Hospital Units," will be used for military emergency purposes only in sections in which the physicians reside. Their duties will be temporary and they will be replaced by regular army officers as soon as the surgeon general of the army can make assignments.

Each unit consists of 15 doctors normally associated with a single hospital. The physicians receive reserve commissions in the United States Public Health Service. If called to duty they will receive pay and allowances of medical officers of equivalent rank in the army.

Landis said hospitals which have substantially completed organization of their units include the San Joaquin County General Hospital, the Stanford University Medical School, the University of California Medical School and the Huntington Memorial Hospital, Pasadena.—*Sacramento Bee*, May 10.

Doctors: Rural U. S. Praised

Praising the rural areas of the United States for having in many instances exceeded their quotas in contributing doctors to the nation's armed forces, the American Medical Association declared that enrollments of medical officers in the army and navy are lagging because of the failure of young available physicians in large cities to volunteer for duty. This situation is particularly prevalent along the Eastern seaboard, the Association's official magazine charged.

The fact that the armed services are not getting all the doctors they need was disclosed at a recent meeting with military authorities in Washington, the *Journal* of the American Medical Association said. The conference revealed that 6,000 doctors must be drawn from the civilian population this year.—*Weaverville Trinity Journal*, April 8.

COMMITTEE ON PUBLIC POLICY AND LEGISLATION

55th California Legislature: Report on Legislation Related to the Public Health

The 55th session of the California Legislature adjourned on May 5th, completing 71 legislative days and a period of 122 calendar days. Actual adjournment occurred on May 8th but the legislative clocks were stopped on May 5th.

The record of the Committee on Public Policy and Legislation of the California Medical Association was practically 100 per cent perfect. The California Medical Association did not sponsor any bills in this session, but supported many measures of concern to members of the profession, and vigorously and effectively opposed many other measures tending to lower professional standards and adversely affect the public health.

* * *

State Board of Medical Examiners:

Special attention and support was given to a series of bills sponsored by the State Board of Medical Examiners. Three of these were passed and have been approved by Governor Earl Warren. Two others were permitted to die after certain serious objections had been pointed out by members of the Legislature.

Assembly Bill 1171 which was an urgency measure and became effective upon approval by the Governor on May 15th was designed to speed up the procedure for examination of candidates for medical license. It permits the Board of Medical Examiners to create committees to pass on qualifications of applicants for certificates and authorizes the taking of a mail vote of the board membership upon the action or recommendations of such committees.

Assembly Bill 1174 provides a method whereby persons whose certificates have been revoked or suspended for more than one year, may petition the board for reinstatement.

Assembly Bill 1175 provides that every applicant for a certificate shall prove that a diploma or other evidence of final, successful and entire completion of instruction and training required by a school approved by the board has been issued to him. This bill and *Assembly Bill 1174* will become effective on August 4, 1943.

The bills which were permitted to die were *Assembly Bill 1172* relating to citations in disciplinary procedure and *Assembly Bill 1173* applying to the immunity of witnesses who testify before the board in disciplinary proceedings.

All of the above bills were introduced by Assemblyman Franklin J. Potter of Hollywood, who was chairman of the Assembly Committee on Public Health.

In addition to the above Senator Jack B. Tenney of Los Angeles, introduced Senate Bill 589 providing that subversive activities or membership in parties or organizations which engage in subversive activities shall be cause for denial, suspension or revocation of licenses to practice medicine. The Senate refused passage of this bill.

Chiropody:

Opposition was presented to *Assembly Bill 1110* and its counterpart *Senate Bill 596*, which would have removed chiropractors from licensing under the State Board of Medical Examiners and established a State Chiropody Act and a California Chiropody Society with wide powers. Both of these bills died in committee. *Assembly Bill 1928* which added chiropody and chiropractors to sec-

tions of the Health and Safety Code, Labor Code and School Code relating to rights and privileges of physicians and surgeons, was also successfully opposed.

Assembly Bill 334, which would have extended the definition of chiropody to include treatment of the leg, was amended to confine the definition to the present law, but it was refused passage as was Assembly Bill 335 authorizing chiropodists to buy or order the sale of hypodermic syringes or needles.

Chiropractic:

All chiropractic bills were defeated in committee. These included proposals to permit chiropractors to treat injured employees under the Workmen's Compensation Act; to permit chiropractors to take a graduate course of 600 hours and receive the degree of graduate physician and use the title "physician"; to permit chiropractic schools to issue diplomas and certificates to "graduate nurses" and to permit chiropractors to make pre-marital and pre-natal tests and issue certificates.

Handicapped Children:

The committee on Public Policy and Legislation actively supported Assembly Bill 257 directing the State Department of Public Health to seek out children with an impaired sense of hearing and appropriating \$26,500 to the department for such work. The bill having been amended to cover "especially the primary and grammar grades of all schools" and require that the Department of Public Health "in its conferences and diagnostic clinics shall employ for such diagnostic investigation trained otologists." This bill passed both houses of the Legislature and is before the governor for approval.

Health Insurance:

Assembly Bill 1079 and Senate Bill 885 covered the same schemes of State Health Insurance that were defeated in the 1939 and 1941 sessions of the Legislature. Both of these bills died in committee.

Hospitals:

The committee gave approval and support to a series of bills sponsored by the Association of California Hospitals, designed to meet changing conditions in hospital operations and service. Likewise it opposed other bills which appeared inimical to the best interests of the public and good hospital service. Particular attention was given to bills clearly defining the status of nonprofit hospitals under the Unemployment Insurance Act and to Assembly Constitutional Amendment No. 17, which will be on the ballot at the next general election, and which provides that the legislature may exempt from taxation all or any part of the property used exclusively for nonprofit hospital services.

Massage:

Assembly Bill 528, setting up a California State Board of Massage, was successfully opposed in committee.

Naturopathic:

The same old Naturopathic bill, which has been defeated in several past sessions of the Legislature and also by vote of the people when submitted as an initiative, was revived in Senate Bill 1077. This bill passed the Senate but was decisively defeated in the Assembly Committee on Public Health.

Nursing:

The committee gave its support to the nursing profession in the defeat of bills extending the scope of practical nurses and lowering the standards of nursing practice. It gave active support to Assembly Bill 326, providing for a clarification of emergency nursing service during the present war times. This bill was agreed

upon by conference of the Director of Professional and Vocational Standards, the Board of Nurse Examiners, the California State Nurses Association, the Association of California Hospitals and the California Medical Association. It was approved by Governor Warren on May 18th.

Physical-Therapy:

Assistance was given the members of the California Chapter of the American Physiotherapy Association in their Assembly Bill 664 relating to the practice of physical therapy, schools of physical therapy and the registration of physical therapy technicians. This bill was bitterly opposed by the chiropractors and was extensively amended by a sub-committee of the Assembly Committee on Public Health. In its amended form, it was deemed undesirable.

Pre-Marital Examinations:

On April 24th, Governor Warren signed Senate Bill 547, relating to pre-marital examinations. This bill permits acceptance of certificates from other states having comparable laws and certificates signed by United States Army or Naval medical officer for military personnel.

Public Health Department:

One of the most bitterly contested measures in the entire legislative session was Assembly Bill 686 relating to the Department of Public Health. This bill sponsored by Speaker of the Assembly Charles W. Lyon of Los Angeles, required that the State Director of Public Health "shall hold the degree of doctor of medicine from an approved medical college and shall be eligible to license to practice in the State of California. He shall have had in addition at least one year's postgraduate training in a school of public health approved by the State Board of Public Health, and a minimum of five years' practical experience as an administrative officer in a well organized health department."

Osteopaths promoted a powerful campaign to amend out the words "doctor of medicine" and substitute "physician and surgeon," so that members of their group might be eligible for appointment as Director of Public Health. They offered their amendments before committees of the Assembly, and again on the floor of the Assembly, but were decisively defeated. When the bill came up for hearing in the Senate Committee on Governmental Efficiency they again presented their amendment, backed by a delegation of their professional members and educators but the committee refused to accept it. They persisted until the bill was finally passed by the Senate and went to the governor. Barrages of telegrams, letters and telephone calls flooded the legislature, but to no avail as Assemblyman Lyon successfully carried his bill through both Assembly and Senate without the osteopathic amendments.

State Guard:

The entire state guard act was rewritten by Assembly Bill 1929 which was approved by the Governor on May 2nd. The act provides that the guard shall be organized "in conformity with the United States Army Table of Organizations," which would include the qualifications for the medical personnel.

Sales Tax:

Assembly Bill 1525 which would have exempted from the sales tax orthopedic, surgical, dental, ophthalmic, ocular and auditory appliances or restorations passed the Assembly with little opposition but was turned down by the Senate Committee on Revenue and Taxation.

Workmen's Compensation:

No changes were made in the Workmen's Compensa-

tion Act, from the standpoint of medical care. Assembly Bill 292, relating to percentage contracts and rebates for medical or surgical care or hospitalization, was introduced early in the legislative session under the sponsorship of organized labor. Pursuant to instructions from the Council of the California Medical Association, the Committee on Public Policy and Legislation, caused the following amendment to be offered:

"No agreement or contract between an employer or insurance carrier and any other person relating to the measure or amount of compensation for medical, surgical or hospital care rendered or to be rendered under this Division (including agreements of the character described in Sec. 5304 of this Code) shall be enforceable or of any force or effect unless (1) a complete copy thereof is filed with the Commission not more than five (5) days after its execution, and (2) its terms and provisions are approved by the Commission in writing within thirty (30) days of the date of filing. If any agreement or contract within the scope of this Section is not evidenced by a writing, a memorandum fully describing its terms shall be prepared and filed with the Commission in lieu of the copy mentioned above. The certificate of authority of any insurance company convicted of violation of any of the provisions of this Section shall be revoked by the Insurance Commissioner of this State in accordance with the provisions of Section 704.5 of the Insurance Code. Any persons violating any of the provisions of this Section shall be guilty of felony."

The committee also caused the same provisions to be introduced in Senate Bill 1097.

For strategic reasons organized labor decided later in the session to drop any further activity in behalf of these bills, and both acts died in committee.

Miscellaneous:

Many miscellaneous matters of interest to members of the medical profession were before the Legislature. A few of these may be mentioned.

Assembly Bill 515 appropriating \$87,000 to the University of California to establish and maintain a School of Public Health which passed the Legislature and is before the Governor for action.

Assembly Bill 1077 relating to establishment and maintenance of student health services and infirmaries at state colleges, which was opposed by the medical profession and defeated in committee.

Senate Bill 145 appropriating \$35,000 to the California Polytechnic School for the cultivation of herbs for medicinal and perfume purposes, passed by the Legislature and now on the Governor's desk.

Senate Bill 548 which has been signed by the Governor, permitting governing boards of school districts having less than 10,000 daily attendance to provide medical and hospital services through nonprofit membership corporations or accident insurance, to pupils injured on premises of the district.

Many other legislative matters occupied the daily attention of the Committee on Public Policy and Legislation, throughout the 122 days covered by the session, but the above are a few of the high spots. A total of 3,397 measures were introduced in the Senate and the Assembly. Over 300 of these had some reference to public health questions and required observation and attention at various times. The Public Health League of California again established an office in Sacramento for the legislative session with its executive secretary and necessary assistants on the job. This office kept the legislative committee in daily touch with all developments, which in turn were relayed to the central office, the legal department, the council and component societies for indicated action.

Public Health School

Public health authorities in California are urging passage of a bill before the Legislature to create a school of public health in the University of California. A modest budget of \$87,000 is carried in the bill for setting up and operating the school for the next biennium.

The purpose of the school would be to train public health administrators. The war has done two things making such training imperative. It has taken many public health experts into the armed forces. It has created new sources of dangerous epidemic disease contagion. The net result is a greatly reduced form of trained personnel to combat a greatly increased menace.

The postwar picture is equally grave. California will be confronted by baffling social, economic and population problems when the war is over, in all of which public health will have a prominent part. Upon state and local authorities will rest responsibility for preventing a breakdown of health safeguards. Only with the help of trained experts can that responsibility be discharged.

There is no school in the West with a full complement of courses in public health. For the costs of the education, public health training is a most profitable investment because it is directed toward prevention of epidemics and maintenance of physical resistance, thereby avoiding the vastly greater costs of combating disease outbreaks after they become widespread.

The bill (AB 515) has been approved by the lower house and now rests in a committee of the Senate. It should be reported out for passage before the legislative session ends.—San Francisco News, April 28.

Battle For Health Moves Steadily Forward In U. S. A.

There are approximately 41,000,000 persons within the United States for whom no full-time public health service is provided by either local or state government. To cover this gap, the American Public Health Association has proposed legislation which would enable sparsely settled areas to organize local health units.

As the *American Medical Journal* points out: "This legislation proposes that county full-time health departments may be created either by resolution of a county board or by the voters of a county and that multiple county health departments may be set up. If four or more counties wish to associate themselves in establishing and maintaining such a department, prior approval must be obtained from the state department of public health.

"Provision is made for the levying of a special tax not to exceed 1 mill on the dollar on all taxable property in the county or counties involved to finance the operation of the department." The *Journal* further urged local medical societies to analyze local needs in conference with state health officers and support legislation necessary for providing local health units.

Medical men would be the last to oppose sound measures designed to extend medical service. They constantly seek new methods to combat illness and death. And the laboratory is not the only scene of battle for them. They will fight on the public platform, if need be, for proposals which they think will further the cause of health, just as they oppose measures that their training and experience tell them would hurt the cause of health.—San Jose Mercury-Herald, May 6.

Medical Journal Urges Parleys on Federal Control

Chicago, April 29.—(UP.)—The *Journal* of the American Medical Association today suggested the immediate establishment of a government agency to handle post-war nutritional and medical problems.

"Certainly," the magazine said in an editorial, "the time is not too soon to suggest that the government of the United States establish as soon as possible a mechanism for giving these questions the analysis and consideration that they may deserve and for suggesting the steps that may be followed under a democratic government for their solution."

The editorial mentioned proposals made in the Beveridge plan in Great Britain and in the report of the National Resources Planning Board in this country and reported that the Council of the British Medical Association felt that the profession would be opposed to a complete system of state medicine.

"Here in the United States," the editorial continued, "representatives of American business and the other professions have begun to realize that the tossing of medicine as a sop to the proponents of state medicine is merely a concession which does not delay but rather gives impetus toward complete socialization and destruction of private enterprise."—Long Beach Telegram, April 25.

COMMITTEE ON MEDICAL ECONOMICS

Concerning Wage and Hour Order of Industrial Welfare Commission

Reference was made in this column in March to the new wage-and-hour order issued by the Industrial Welfare Commission of the State of California. Word has now been received that this order will not become effective until June 28, 1943; this gives a little more time to adjust conditions which might not come up to the standards set in the order.

In the March issue it was inadvertently stated that the basic provisions of the Industrial Welfare Law of California prohibited the employment of women employees before the hour of 6 a.m. or after the hour of 10 p.m. That statement should be amended to show that this provision covers only minor employees, under the age of 18 years, but does not apply to adult women employees. The law states that if women are employed after 10 p.m. or before 6 a.m., suitable transportation between their homes and places of employment must be available.

As regards physicians' offices, it should also be pointed out that the law excepts "professional occupations" from the hour provisions. This exception has been interpreted to apply to registered nurses, who may be called upon for employment of more than 48 hours a week or during night hours, even though they might not be more than 18 years of age.

COMMITTEE ON ASSOCIATED SOCIETIES AND TECHNICAL GROUPS

Pacific States Medical Executives' Conference

The fifth annual session of the Pacific States Medical Executives' Conference, originally brought into being under the auspices of the California Medical Association, was held in Portland, Oregon, on Saturday-Sunday, May 29-30, 1943, with headquarters at Hotel Benson.

The affiliated state medical associations are those of California, Nevada, Oregon, Washington and Idaho.

The California Medical Association was represented at the Conference by Council Chairman Philip K. Gilman, Henry S. Rogers, Past President, and Secretary-Editor, George H. Kress.

Program follows:

(COPY)

PACIFIC STATES MEDICAL EXECUTIVES' CONFERENCE

Fifth Annual Session

At Hotel Benson, Portland, Oregon

May 29-30, 1943

Affiliated Associations: California, Nevada, Oregon, Washington and Idaho State Medical Associations.

PRESIDENT PHILIP K. GILMAN

Captain, Medical Corps, U. S. Naval Reserve
San Francisco, California

Presiding

PROGRAM

Saturday, May 29th

6:30 P.M. Dinner Session.....Rose Room
Greetings from the Oregon State Medical Society.
George E. Henton, Portland, Oregon, President.

"The Procurement and Assignment of Medical Officers."

Discussion to be opened by Philip K. Gilman, Captain, Medical Corps, U. S. Naval Reserve, Office of Naval Officer Procurement, 12th Naval District, San Francisco, California.

Sunday, May 30th

10:00 A.M. Morning Session.....Room 204

"Programs of Maternal and Infant Care for the Wives and Infants of Enlisted Men through Federal Grants-in-Aid to the States."

Discussion to be opened by Arthur Anderson, Executive Secretary, Washington State Medical Association, Seattle, Washington.

"Organization, Progress and Problems of Medical Service Plans Sponsored by the State and County Medical Societies."

Discussion to be opened by Willard C. Marshall, General Manager of the Oregon Physicians' Service, Salem, Oregon.

"Features and Trends of Blue Cross Hospital Service Plans Affecting Medical Service Plans and Medical Practice."

Discussion to be opened by George H. Kress, Secretary-Editor, California Medical Association, San Francisco, California.

12:30 P.M. Luncheon.....Rose Room
Business Session immediately following.

2:00 P.M. Afternoon Session.....Room 204

"Medical Service Plans in War Industrial Centers and Federal Housing Projects."

Discussion to be opened by George H. Kress, Secretary-Editor, California Medical Association, San Francisco, California.

"Medical Service Plans for Farmers and Agricultural Workers."

Discussion to be opened by Henry S. Rogers, Past-President, California Medical Association, Petaluma, California.

"State Legislation Affecting the Public Health and Medical Practice."

Discussion to be opened by Arthur Anderson, Executive Secretary, Washington State Medical Association, Seattle, Washington.

4:00 P.M. Adjournment.

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Resolutions adopted on May 29-30, 1943, at the Fifth (5th) Annual Session in Portland, Oregon.

Philip K. Gilman, California, presiding.

The Reference Committee (George E. Henton, Oregon, Chairman, Homer D. Dudley, Washington, and George H. Kress, California) presented the following resolutions:

1. *Resolved*, That approval be expressed of *federal assistance to the wives and children of service men* as outlined in the plan under consideration by the Federal Children's Bureau; provided, however, that the constituent state medical associations which are members of the Pacific States Medical Executives' Conference be requested to consider carefully the merits of the procedure proposed by the Oregon State Medical Society, wherein any allocations for professional services agreed upon as compensation for obstetric work involved shall be given to the wives of enlisted men, such patients then to secure the services of physicians as they themselves deem proper, the fee for professional services to be decided by mutual agreement between the patients and the attending physicians; and

Resolved, That the Conference Secretary send outlines of the Oregon plan to the constituent state associations; and further

Resolved, The suggestion be made that a special committee composed of representatives of the Pacific States medical associations be brought into being if possible, to further consider the above Oregon plan.

2. *Resolved*, That the Pacific States Medical Executives' Conference refers for careful consideration of constituent state medical associations which to date have not filled their quotas for military personnel, the plan of setting up in local communities *special committees of senior physicians* who will cooperate with procurement and assignment service committees, in having eligible physicians make applications for commissions to the Armed Services.

3. *Resolved*, That the Pacific States Medical Executives' Conference recommends for consideration to the respective constituent state medical associations, the desirability of informing *physician members who are specialists*, concerning the importance of accepting as much general practice work as possible, in order to relieve the heavy work now falling on the shoulders of their fellow practitioners.

4. *Resolved*, That the Pacific States Medical Executives' Conference recommends that the respective constituent state medical associations carry on a campaign of publicity among members, emphasizing the importance of *eliminating luxury hospital care and optional nursing* as much as may be possible; inasmuch as through such cooperation it will make available hospital beds for a larger number of citizens, especially war industrial workers, who may be in great need of such hospital and nursing care.

5. *Resolved*, That the Pacific States Medical Executives' Conference recommends to the respective state medical societies the desirability of having their respective delegates call to the attention of the House of Delegates of the American Medical Association the nature of many of the *medical service problems which have come into existence in Pacific States* and other communities that are carrying on extensive war production activities, to the end that over-all plans may be brought into being that will aid in the prevention of medical service complications that may otherwise arise.

6. *Resolved*, That the Pacific States Medical Executives' Conference recommends to the constituent state medical associations which maintain official publications, the desirability of placing on the *complimentary mailing lists* the names of the presidents and secretaries of each of the constituent state medical associations represented in this Conference; in order to permit such officers to have more available from month to month the official proceedings of their neighboring state medical organizations.

7. *Resolved*, That it is recommended that the Executive Committee of the Pacific States Medical Executives' Conference set the *date of the annual meeting of this Conference* sixty to ninety days prior to the annual meeting of the House of Delegates of the American Medical Association in order that the constituent state associations represented in the conference may be better prepared to give advices to their respective delegates.

After discussion, section by section, each of the above resolutions was unanimously approved by the representatives from the States of Washington, Oregon, Idaho and California.

COMMITTEE ON HOSPITALS, DISPENSARIES AND CLINICS

On California Nursing Personnel Needs

Medical services are being rationed. Medicine "as usual" is out. Likewise nursing service is necessarily being curtailed.

The relation of the supply of nurses to the demand for nursing service repeats a pattern grown painfully familiar in our national economy.

The striking increase in hospitalization promises even greater acceleration because of industrial expansion and the development of target areas, such as we have in (California) (San Francisco Area).

More nursing service is being demanded by the Army and Navy and these demands must be met. To meet the needs at least three of every five of those nurses now eligible must join the armed forces.

As physicians we must help design measures to guarantee most effective use of the nursing service at hand.

We know that a part of the service now given by graduate and student nurses could be given by personnel with less costly training. Heavier loads must be borne by nurses all along the civilian front. The precious supply of available nursing service must not now be used for the performance of nonnursing activities, but must be hoarded for use in situations which demand expert technical service.

The following letter has been submitted by representatives of the Nursing Profession:

How Physicians May Aid in Promoting Adequate Nursing Care for Patients:

In order to conserve nursing service so that physicians will receive the best assistance and at the time when it is most essential, and in order that the seriously ill patients will be assured safe nursing care, I ask you, my fellow physicians, to consider methods by which we can make a real contribution and one which will reflect itself in better service to our patients.

1. The services of private duty nurses should be reserved for acutely ill patients and for patients who require special treatments which can be given safely by registered nurses only, and for situations where the character and limited amount of nursing service available for patients makes it necessary for private duty nurses to be employed.

2. Physicians should advise patients as to the most effective use of nursing service, and appeals should be made to the public to refrain from employing two or three special nurses for one patient during the period of convalescence.

3. Hospitals should be urged to make provision for group nursing (one nurse caring for two or more hospital patients) and for hourly appointment nursing service in homes.

4. Use should be made of auxiliary nursing personnel for nonnursing activities.

COMMITTEE ON HEALTH AND PUBLIC INSTRUCTION

Northern California Public Health Association

Election of Dr. W. A. Powell, Contra Costa County health officer, as president of the Northern California Public Health Association, was announced on May 26th, as the second and concluding session opened at Hotel Claremont in Berkeley.

Other new officers are: Dr. Dwight Bissell, San Jose city health officer, president-elect to succeed Dr. Powell in 1944; Walter Mangold of Berkeley, U. C. sanitarian, vice-president, and Mrs. Helen Hartley of the San Joaquin local health district, treasurer. Mrs. Ann W. Haynes of the San Francisco office of the State Department of Public Health was reelected secretary.

The retiring president, Dr. John D. Fuller, Santa Cruz County health director, was elected to the governing council of the American Public Health Association, and Dr. Malcolm H. Merrill, chief of the State Health Department laboratories, Berkeley, named representative to the western branch of the APHA executive committee.

At a panel on streamlining programs and personnel for the war, the Berkeley program, directed by Dr. Frank Kelly, city health officer, was described as one of the models in the nation although the city has only one public

health nurse for each 5,000 inhabitants against the accepted ratio of one for each 2,500.

Southern California Public Health Association

Outstanding public health officials of the United States and England were present on May 24th at the Pasadena Civic Auditorium to participate in a public health conference which will concentrate on wartime health problems.

The conference was originally scheduled for San Francisco but was moved to Southern California under the auspices of the Southern California Public Health Association, of which Dr. George M. Uhl, city health officer of Los Angeles, is vice-president.

All-Day Session

The conference commenced at 10 a.m.

The theme of the afternoon session was "Medical Care During the Emergency and Postwar Periods," and included the following speakers: Dr. Nathan Sinai, University of Michigan; Dr. Edith Sappington, United States Children's Bureau; Dr. Don Gudakunst, National Foundation for Infantile Paralysis; Dorothy Deming, R.N., American Public Health Association.

Briton to Speak

In the evening Dr. Herbert Hughes Parry, Bristol, England, spoke on organizing a city against an air raid, and Dr. Albert McGowan, medical director of the American Red Cross, discussed "The Red Cross in a War-torn World."

Other speakers of the day were Dr. W. L. Halverson, State Director of Health; Dr. John L. Rich, health officer of New York; Dr. H. O. Swartout, health officer of Los Angeles County; Dr. E. R. Coffey, United States Public Health Service, and Dr. Uhl.—*Los Angeles Times*, May 24.

County Charities to Cost \$51,000,000 Next Year

Relief Rolls and Share of Aged Help Less, but Expense Estimated at \$51,000,000

While there has been a decline in certain kinds of public relief, during the coming fiscal year it will cost the taxpayers of Los Angeles County approximately \$51,000,000 to finance the various types of charity administered by the county government.

The decrease is due, according to Arthur J. Will, head of county institutions, to a greatly reduced number of persons on the indigent relief rolls.

Will said that operation of the General Hospital, Olive View Sanatorium, Rancho Los Amigos and other institutions will cost \$12,000,000 during the new year. Other welfare activities such as old age aid, indigent relief, aid to crippled children and the blind will cost: \$39,000,000. . . .

At present there are 65,000 aged aid recipients in Los Angeles County. Liberalized rules of eligibility for obtaining the aid will jump the figure to 85,000, it was asserted by welfare officials.—*Los Angeles Times*, May 17.

Doctors for Farmers

Current attacks on Farm Security Administration threaten to undo one of the most effective programs of the New Deal. If Congress succeeds in stripping FSA of funds, there will be an end of the medical care program, which has brought "group health" to 117,000 families in the lower income classes of the country.

At first, this program was bucked by the American Medical Association which worried about "socialized medicine." But after six years a recent report of the conservation Medical Association views the experiment with favor.

Reason for the change is that state medical associations, in the proportion of about four to one declared that the group health program did not destroy the independence of doctors, but actually gave them more business.

The Farm Security medical plan is a "prepayment plan," under which families in farm areas pay a fixed fee for a full year's medical care for the entire family,

regardless of what ailments may develop. The fee ranges from \$15 in the poorer areas, upwards to \$40.

But the farm bloc, now running wild in Congress, probably will sweep aside this aid to rural communities, though it now operates in 1,140 counties. Incidentally, most Congressmen don't even know this medical service exists.—From Drew Pearson's "Merry-Go-Round" in *Hanford Journal*, April 22.

Board Indorses Hospital Drive

Indorsement by the Board of Supervisors of the United Hospital Fund campaign to provide 800 beds and other facilities in eight local nonprofit hospitals was announced yesterday by T. R. Knudsen, general chairman of the \$3,000,000 campaign.

Knudsen also announced that the executive council of the Church Federation of Los Angeles has indorsed the appeal.

The eight hospitals to be expanded as a result of the campaign are: California, Good Samaritan, Hollywood Presbyterian, Methodist, Monte Sano, Queen of Angels, St. Vincent's and White Memorial.—*Los Angeles Times*, May 18.

Rationing Has Aided British, Doctor Claims

Health Association Hears Praise for 'Plain' Foods

Food rationing has done the British more good than harm in removing luxuries and supplying plain, wholesome nourishment, according to Robert Hughes Parry, doctor of public health, Bristol, England, who addressed the Southern California Public Health Association last night at the Civic Auditorium.

Speaking before 300 persons at the one-day session of the association, Dr. Parry gave credit for England's staunch resistance to war to her homes and her women folk.

Homes Attractive

"We have come to believe that the reason we have put up with what we have in this war is because we had homes where children can see flowers growing, homes that are built with the idea they must serve as a workshop to the nation's mothers.

"Between the last two wars 36,000 new homes were built for the working classes and between 7,000 and 10,000 unfit ones were torn down."

Dr. Parry said the first jolt to the stability of these homes occurred when the young men went to war, but he praised the "tenacity and bravery of the women, who shouldered the extra responsibilities in the homes and have served as fire fighters, ambulance drivers, in industry, the army and air force."

Juvenile delinquency has increased 41 per cent among children under 14 years of age, and 22 per cent among those between 14 and 17.

"But we mustn't take this too seriously because we have found in England that about 90 per cent of the war-delinquent children turn out to be good citizens."

Favors Small Shelters

He said steel tables as home air raid shelters or small neighborhood shelters housing from 20 to 50 persons have proved more satisfactory than the large mass shelters. The steel tables will support a two-story building if it collapses.

"It's a pleasure to see the energy and cheer with which you face your health problems in America. We have heard less grumbling in England the past four years, because we have come to realize that we have been asking for this trouble and have made up our minds that our descendants will not be allowed to suffer from the mistakes of this generation."

Dr. Albert McCown, Washington, D. C., medical director American Red Cross, reviewed the history and service of the organization and praised Pasadena for "pooling its resources," and for the coöperation between the Red Cross and Civilian Defense groups.

Five hundred attended an afternoon meeting at which Dr. Reginald M. Atwater, executive secretary, American Health Association, and Dr. Nathan Sinai, professor of hygiene and public health at University of Michigan, were speakers.

Round tables on methods of solving present and future public health problems in which outstanding health workers attending the meeting participated, concluded the afternoon session.

Charles W. Arthur, Pasadena health officer and president Southern California Public Health Association, presided throughout the day and evening.—*Pasadena Post*, May 25.

COUNTY SOCIETIES†

CHANGES IN MEMBERSHIP

New Members (14)

Alameda County (2)

Buehler, Lyle H., *Niles*
Meadoff, Nathan, *Oakland*

Contra Costa County (2)

McNerney, H. W., *Richmond*
Rampoldi, Henry D., *Martinez*

San Bernardino County (1)

Shannon, Gizella W., *Patton*

San Diego County (1)

Robertson, Cornelia F., *San Diego*

San Luis Obispo County (1)

Treadwell, Richard T., *San Luis Obispo*

Shasta County (1)

Mackintosh, William A., *Project City*

Ventura County (4)

Huff, William Cloyce, *Oxnard*
Kelley, William Travis, *Ventura*
Ridge, Gerald K., *Ventura*
Vincent, Ward R., *Ventura*

Yuba-Sutter County (2)

Lawton, Floyd B., *Eureka*
Samson, Pieter, *Marysville*

Transfers (1)

Johnson, William C., from Monterey County to Kern County

Retired Members (10)

Ash, Rachel L., *Los Angeles County*
Barker-Ellsworth, Alice, *Los Angeles County*
Cahen, Caesar George, *Los Angeles County*
Houseworth, A. L., *Los Angeles County*
Johnston, James, *Los Angeles County*
McCleave, Thomas C., *Alameda County*
Pursell, Francis J., *Los Angeles County*
Reasner, William F., *Los Angeles County*
Titcomb, Lillian Ray, *Los Angeles County*
Wilson, Homer S., *Los Angeles County*

Life Members (1)

Pratt, Mathew, *Shasta County*

Horn, Frank Ignatius. Died at Los Angeles, May 6, 1943, age 68. Graduate of Magyar Királyi Pázmány Petrus Tudományegyetem Orvosi Fakultasa, Budapest, 1894. Licensed in California in 1938. Doctor Horn was a member of the Los Angeles County Medical Association, and the California Medical Association.



Makinson, Frank Roscoe. Died at Oakland, April 18, 1943, age 58. Graduate of the Oakland College of Medicine and Surgery, 1913. Licensed in California in 1913. Doctor Makinson was a member of the Alameda County Medical Association, the California Medical Association, and a Fellow of the American Medical Association.



Michael, Luther. Died at San Leandro, April 25, 1943, age 80. Graduate of the Medical College of Ohio, Cincinnati, 1884. Licensed in California in 1894. Doctor Michael was a member of the Alameda County Medical Association, the California Medical Association, and a Fellow of the American Medical Association.



Woolf, Montague Sidney. Died at San Francisco, April 20, 1943, age 58. Graduate of the Royal College of Physicians of London, 1914. Licensed in California in 1918. Doctor Woolf was a member of the San Francisco County Medical Society, the California Medical Association, and a Fellow of the American Medical Association.



OBITUARIES

John Irving Beattie 1883—1943



Doctor J. Irving Beattie, President of the Santa Clara County Medical Society, passed away May 7, 1943, after a short illness. Dr. Beattie was born in Canada, received his college education at the College Institute, Ontario, Canada, and his M. D. degree from Cooper Medical College in 1905, after which he spent eighteen months in London and six months in the French Hospital in San Francisco. With the exception of his military service as a First Lieutenant in World War I, he had been in continuous practice in Santa Clara County since 1907.

Dr. Beattie was an outstanding example of a true general practitioner of medicine. Exceptionally competent in the diagnosis and treatment of the vast majority of human ills, quick to recognize the unusual case requiring special study, he was always prompt in seeking consulta-

In Memoriam

Beattie, John Irving. Died at San Jose, May 7, 1943, age 59. Graduate of the Cooper Medical College, San Francisco, 1905. Licensed in California in 1906. Doctor Beattie was a member of the Santa Clara County Medical Association, the California Medical Association, and a Fellow of the American Medical Association.



Cahen, Caesar George. Died at Los Angeles, April 29, 1943, age 58. Graduate of the University of Southern California School of Medicine, Los Angeles, 1909. Licensed in California in 1909. Doctor Cahen was a retired member of the Los Angeles County Medical Association, and the California Medical Association.

† For roster of officers of component county medical societies, see page 4 in front advertising section.

tion thereon. His honesty and frankness and his sympathy and understanding of the varied problems of life endeared him to his very large clientele. His kindly consideration and willingness to assist his fellow practitioners, especially the young man just entering practice, were outstanding, and their regard for him was shown by electing him to the Presidency of the Santa Clara County Medical Society.

Dr. Beattie was a tireless, ceaseless worker, rarely sleeping more than five hours a day, and spending little time in recreation. A regular attendant at medical meetings, local, state, and national, he kept in close touch with the advancement of medical science, and each succeeding year found him in the front ranks of his profession.

His final illness was brief, only six weeks, a blessing too frequently denied the self-sacrificing worker. No longer will he hear the call of the distressed, the anxious parent, nor the crying child. No longer will his smile and hand-grasp greet us all, but in the hearts of the thousands whom he served, and among his colleagues, the memory of J. I. will never dim.



Frank Roscoe Makinson

1885—1943

Resolved, By the Council of the California Medical Association, that in the death of Frank R. Makinson, the California Medical Association has lost an unselfish and able worker for scientific and organized medicine; who, as the Councilor representing Alameda and Contra Costa Counties and as Chairman of the Committee on Public Health Education had rendered most efficient service; and be it further

Resolved, That the Council, on behalf of the California Medical Association, place on record this recognition of his great personal and professional qualities and worth, and extends, to the members of his family, deepest sympathy in their great loss.

PHILIP K. GILMAN, *Chairman*,
GEORGE H. KRESS, *Secretary*.

THE WOMAN'S AUXILIARY TO THE CALIFORNIA MEDICAL ASSOCIATION†

MRS. CHARLES C. LANDIS.....President
MRS. RENE VAN DE CARR.....Chairman on Publicity
MRS. ROSSNER GRAHAM...Asst. Chairman on Publicity

Annual Session Address of the President*

MRS. F. G. LINDEMULDER

San Diego

Mr. Chairman, President Molony, Members of the California Medical Association and Guests:

The Woman's Auxiliary to the California Medical Association deeply appreciates the opportunity granted its President, to appear before your general session and to tell you about the activities of our organization. The vast majority of you are our friends and well wishers,

and realize the service possibilities of the Auxiliary. But perhaps there is a small minority of you that do not quite understand our aims and objectives or how we are attempting to help you, our parent organization. We are organized for your benefit and are awaiting the opportunity to serve you.

Despite the fact that many of our members have left their homes to be with their husbands as long as possible before they go overseas, we still have twenty-nine County Auxiliaries with a total membership of 1,857. One Auxiliary, because of its large loss in members, disbanded and one affiliated with another Auxiliary.

Due to the war emergency, we have emphasized projects that not only assist the war effort, but still have a direct connection with what our Auxiliary has always stood for: "To bring its members into more active affiliation with organized medicine; to encourage kindly social relationships; to cooperate with the California Medical Association and its component County Societies and other organizations in all desirable public health and social welfare work."

The Woman's Auxiliary has placed 374 subscriptions to "Hygeia" this year and one of our Counties has exceeded its quota.

We have given of our time and energy to the Basic Science Act, and placed speakers, distributed pamphlets, written letters, informed lay organizations of the importance of the bill, and distributed all letters to the physicians and dentists, who in turn, were to send or give them to their patients. I am sure that the Public Health League of California would be glad to endorse my statement when I say it was no fault of the Auxiliary that the bill was lost.

Many of our Auxiliaries have supported their local Blood Banks, one, with a membership of twenty-one, completely maintains a Blood Bank even to owning the building it occupies. Another maintains the Motor Corps and Canteen Corps, and for a time furnished the technicians for their Blood Bank from their membership. There have been "Auxiliary Days" at several of the Blood Banks throughout the State, when members were blood donors.

In Red Cross and Defense work, our members are doing an extremely fine job. We are represented in almost every phase from airplane spotters to Ration Board workers. County Auxiliaries have completely furnished recreation rooms for various camps and hospitals. They have furnished food and entertainment at Hospitality Houses. Thousands of hours have been given to Red Cross work, many of Auxiliaries having their own day when they furnish all the workers. One County has complete charge of a Red Cross Unit where they specialize in work having a direct bearing upon the needs of the medical man in the Service.

The sum of \$750.00 has been given to Student Loan Funds throughout the State, for the benefit of medical students and nurses.

We have attempted to keep ourselves abreast of the times by having programs on medical discoveries as well as on Nutrition and Health Defense, so we in turn, could inform the lay public. We have worked in conjunction with the National Cancer Control program, placed donation cans, mailed literature, and furnished speakers to lay organizations. We have advocated annual physical examinations for women.

One of our main projects this year has been to raise money for the Medical Benevolent Fund of the California Medical Association. Los Angeles Auxiliary has donated \$290.00 this year to the Physicians' Aid, but the rest of the Auxiliaries wish to donate what they

† Prior to the tenth of each month, reports of county chairmen on publicity should be sent to Mrs. Rene Van de Carr, 51 Prospect Road, Piedmont. For roster of state and county officers, see page 6, in front advertising section.

* Address of the President, given at the first general meeting of the Seventy-second Annual Session of the California Medical Association, Los Angeles, May 2-3, 1943.

have raised to you. So in appreciation of the splendid help and coöperation we have received from the Medical Association, it is my pleasure at this time, Dr. Molony, to present to you on the behalf of the Woman's Auxiliary to the California Medical Association, this check for \$1,000.00 to be applied and used as the Medical Association sees fit, for Medical Benevolence.

News Items

The subject of providing aid for the Infirmary and Emergency rooms at the Army Post in Eureka was considered at a meeting of the Woman's Auxiliary to the Humboldt County Medical Association on May 3. At that time it was unanimously decided to sponsor a play reading by Mrs. Gordon Manary of Scotia for this purpose.

During the first week of June, Auxiliary members will be joint hostesses with members of the Women's Club of Service Officers at the Eureka U. S. O. Center. Mrs. Don R. Austin and Mrs. John N. Chain are in charge of arrangements.

The Woman's Auxiliary to the Los Angeles County Medical Association met on March 23, for a social hour followed by a business meeting and Tea. Eighty-five members attended the event, which was held at the Los Angeles Medical Association Building. Mrs. Franklin Farman presided.

Announcement of the formation of the new Surgical Dressing Unit in downtown Los Angeles was made. Mrs. Donald Charnock and Mrs. Verne Soper will act as supervisors for this project. Members were urged to lend their support by giving a day a week to it. There is still a great need for workers in the Auxiliary's Red Cross Unit, the work of which is carried on at the County Medical Building.

Mrs. William C. Boeck, Chairman of the Nominating Committee, announced the following slate of officers and directors for next year:

President, Mrs. William R. Molony, Jr.
First Vice-President, Mrs. Hubert T. Wilken.
Second Vice-President, Mrs. Ludwig L. Kaftan.
Secretary, Mrs. John E. Short.
Treasurer, Mrs. C. R. Gailmard.

Directors: Mrs. Horace H. McCoy, Mrs. Herbert Movius, Mrs. Ward Rolland, Mrs. Roy Robert Miller, Mrs. F. X. McDonald, and Mrs. Joe Zeiler.

CALIFORNIA PHYSICIANS' SERVICE†

Beneficiary Membership

Commercial (April, 1943).....	45,300
Rural Health Program.....	5,000
War Housing Projects (approximate).....	43,050
Marin	6,050
Los Angeles.....	7,800
San Diego	12,600
Vallejo	15,400
San Francisco.....	1,000
Total.....	93,350

† Address: California Physicians' Service, 153 Kearny Street, San Francisco. Telephone EXbrook 0161. A. E. Larsen, M. D., Secretary.

Copy for the California Physicians' Service department in the OFFICIAL JOURNAL is submitted by that organization.

For roster of nonprofit hospitalization associates in California, see in front advertising section on page 3, bottom left-hand column.

Acquisition of new members in industrial groups is beginning to hit an upswing after almost a year of just about holding our own. This is the fundamental of C.P.S.'s activities.

The plan for most of the housing projects is probably to be regarded as a wartime endeavor which may suddenly disintegrate. Were this our only activity, C.P.S. would then find itself in a difficult position. The beginning recovery in groups of five or more, scattered throughout the state, is therefore to be regarded as a good sign. It is the cushion upon which the plan will bounce if and when the "temporary emergency" program is no longer necessary. With some 2,000 groups ranging in size from five to several thousand now producing a reasonable unit value, this phase of the program, while still too small in actual numbers, would nevertheless be sufficient to keep the administrative structure together.

With constant exposure to the public, and with the wide publicity C.P.S. is beginning to receive by reason of its contribution to the war effort (through medical care for war workers in Housing Projects) there is appearing an increasing evidence of confidence on the part of the public which should help further development in this field.

* * *

(copy)

May 20, 1943.

Dear Doctor:

Some time ago the War Department in Washington, D. C., by command of Lieutenant General Somervell, notified its Pacific Coast Departments, advising them to get in touch with "Group Health Organizations" in their community in order that civilian employees might have the opportunity to participate. California Physicians' Service has had many calls and is now providing care for the civilian employees of Letterman General Hospital, Camp Roberts, San Francisco Medical Depot, U. S. Engineers, and many other War Department groups. We are quite proud that California Physicians' Service has been selected to furnish this care to these employees.

In our last statement we described the Two-Visit Deductible contract. Our other contract, the *Straight Surgical*, provides service from the date the operation takes place. The member is responsible for *all calls* up to the date the operation is performed. Then California Physicians' Service assumes the responsibility. This contract costs the employee considerably less than the Two-Visit Deductible.

May we have your questions or suggestions on these monthly reports, as it is our desire to keep you informed.

Financial operations for March were as follows:

Membership Dues collected.....	\$51,871.62
Professional Member Registration Fees.....	60.00
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Cost of Administration.....	11,281.03
	<hr/>
Available for March business.....	\$40,650.59
X-ray and lab. on hospitalized patients.....	3,075.43
	<hr/>
Available for remaining professional services..	\$37,575.16
22,097.1 units of service at \$1.75.....	38,669.92
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Transferred from Unit Stabilization Fund....	\$ 1,094.76
Previous balance in Fund.....	30,717.06
	<hr/>
Total Unit Stabilization Fund.....	\$29,622.30

A. E. LARSEN, M. D.

Executive Medical Director.

(Ed. Note. For special article on C.P.S., see page 330.)